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ABSTRACT

This report evaluates the effectiveness of school substance abuse programs in Nevada. It focuses on the extent to which Nevada school districts implement research-based effective substance abuse prevention programs and practices. This report also determines whether Nevada public schools are consistent with new federal initiatives that direct school districts to implement research-based programs in substance abuse and violence prevention. Results show that funding is inadequate in most school districts for implementing the type of prevention programs that schools need. Nevada school districts use a wide variety of commercial, locally developed, and general models of substance abuse and violence prevention programs. They also use five primary substance abuse and violence prevention programs. The effectiveness of these programs is mixed. Six other substance abuse programs are frequently used; their effectiveness has not been completely determined, but the potential is positive. Most school districts conducted fairly comprehensive needs assessment; however, most did not conduct systemic evaluations of their substance abuse and violence prevention programs. The overall conclusion of this study is that Nevada school districts are similar to other school districts across the nation. While Nevada school districts implement some effective research-based programs and practices, most programs currently in place have not been evaluated properly. Includes three appendixes: "Effective Programs in Substance Abuse Prevention," "Substance Abuse and Violence Prevention Survey Instrument," and "Substance Abuse and Violence Prevention Programs in Nevada." (Contains 11 tables.) (MKA)

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ED 443 059

Nevada School-Based Substance Abuse and Violence Prevention Programs

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An Examination of Effectiveness
1997-98

Nevada Department of Education

July 1998

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Table of Contents

Executive Summary i

Introduction 1

Current Trends in Substance Abuse and Violence in Nevada 4

Best Practices in Substance Abuse and Violence Prevention 16

Substance Abuse and Violence Prevention Curricula and Programs 21

Substance Abuse and Violence Prevention Curricula and Programs Benchmarked Against Best Practices 26

Findings 38

Recommendations 41

Appendices

Appendix A—Effective Programs in Substance Abuse Prevention

Appendix B—Substance Abuse and Violence Prevention Survey Instrument

Appendix C—Substance Abuse and Violence Prevention Programs in Nevada

Executive Summary

One of Nevada's highest priorities is safe and drug-free schools. To help determine whether that priority is being achieved, the 1997 Nevada State Legislature passed Assembly Bill 376 that calls for an evaluation of the effectiveness of substance abuse programs that are used in the public schools. This report meets the requirements of AB 376 to evaluate the effectiveness of substance abuse programs in Nevada. It focuses on the extent to which Nevada school districts implement research-based effective substance abuse prevention programs and practices. The report achieves an added purpose of determining whether Nevada public schools are consistent with new federal initiatives which directs school districts to implement research-based programs in substance abuse and violence prevention.

> ***Nevada Assembly Bill 376, Section 52.1***
>
> *...the Department of Education shall conduct an evaluation of the effectiveness of substance abuse programs which are used in the public schools. ...The evaluation must include, without limitation, a review of the results of all surveys and information relating to the use of drugs and alcoholic beverages by pupils which has been collected by the public schools in this state during the immediately preceding 5 years.*

One part of the evaluation analyzed the results from two statewide surveys on substance use and violent behaviors (the Safe and Drug-Free Schools and Communities Student Survey from 1994 and 1996, and the Youth Risk Behavior Survey from 1993, 1995, and 1997). Overall, current trends among Nevada students show that most drug use (other than marijuana and cocaine) and violent behavior have peaked, and are now declining. The trend in Nevada mirrors the present trend across the United States. It suggests that anti-drug prevention activities may be taking hold with Nevada youth. However, while the possible slowdown of illicit drug use among Nevada children is encouraging, the rates of use remain exceptionally high, and in several cases are above the national average. The evaluation found that—

- ✓ Alcohol continues to be the drug of choice among Nevada students; however, progress has been made. That is, the percentage of students who had a drink before the age of 13 decreased and the percentage of students who had at least one drink decreased. In addition, "binge drinking" seems to be decreasing, but Nevada students are still above the national average for binge drinking.
- ✓ Tobacco use is declining in most areas: the percentage of students who smoked tobacco before the age of 13 decreased, and daily smoking seems to have decreased. Only the lifetime use of smoking tobacco remained stable. Both the lifetime and frequent use of chewing tobacco are declining. In addition, the lifetime and frequent use of smoking and chewing tobacco is below the national average.

- ✓ The use of marijuana seems to be increasing, and Nevada students are above the national average. Although the percentage of students who used marijuana before the age of 13 decreased, its frequent use has increased, and lifetime use of marijuana remained unchanged. Nevada students exceed the national levels for both lifetime and frequent use.

- ✓ The use of other drugs by Nevada students remains relatively low. The use of these drugs, other than cocaine, seems to have peaked and is now declining. Lifetime use of cocaine, however, has increased substantially and has surpassed national rates. Frequent use of cocaine seems to have peaked and appears to be declining.

- ✓ The percentage of students who reported fighting on school property or bringing a weapon to school has declined. The percentage of students who fight frequently or bring weapons to school frequently, however, has remained the same.

- ✓ The prevalence rate of students who rode in a vehicle with someone under the influence decreased but the percentage of students who reported doing this behavior frequently remained stable. The percentage of students driving under the influence (both prevalence and frequency rates) increased slightly over previous years.

- ✓ Use of alcohol and marijuana on school property has increased.

In addition to analyzing state trends in substance abuse and violent behaviors, the evaluation also—

- ✓ identified the substance abuse and violence prevention programs currently used in Nevada public schools, and

- ✓ analyzed the effectiveness of the substance abuse prevention programs by determining:

  - ♦ whether they were effective research-based programs, and

  - ♦ the extent to which the school district prevention efforts included 16 "best practices" in substance abuse programs identified for the purpose of this study.

The evaluation identified several key findings about substance abuse and violence prevention programs in Nevada.

- 🔑 ***Funding is inadequate in most school districts for implementing the type of prevention programs that schools need.*** The majority of funds for substance abuse and violence prevention in Nevada comes from the U.S. Department of Education through the Safe and Drug-Free Schools and Communities Act (SDFSCA) program. Most school districts in Nevada received an average of $4.48 per student. Five schools districts received additional funds from SDFSCA because of the high incidence of substance use and violence within the district: they received an average of $6.71 per student. Overall, Nevada school districts received an average of $6.40

per pupil— which is in the low end of the national average of $6 to $8 per student. Although most school districts as well as local service agencies (most notably the county Sheriff's Departments) contributed some resources for prevention efforts, the level of funding is still inadequate in most districts. Limited funding almost always means that schools and districts must make some difficult choices concerning what and how much to implement in prevention efforts.

- ***Nevada school districts used multiple components.*** Most of the school districts implemented both classroom instruction and student support services as part of their prevention efforts. While much of the literature on research and practices in prevention describes school-based programs as consisting primarily or entirely of classroom-based instruction, most Nevada school districts use a combination of classroom instruction and nonclassroom instruction such as Student Assistance Programs and Counseling Programs. These support services are considered one of 16 best practices[1] in substance abuse prevention identified in this study.

- ***Nevada school districts use a wide variety of commercial, locally developed, and general models of substance abuse and violence prevention programs.*** In all, the evaluation identified 65 different substance abuse and violence prevention programs: 23 commercial programs, 21 locally developed programs, and 11 general program models, such as peer mentoring programs and Student Assistance Programs. Most of the prevention programs were focused to serve all students at the school or within a grade span *(universal)* rather than targeted at an at-risk population *(selected)* or students already involved in drug use *(indicated)*.

- ***Nevada school districts use five primary substance abuse and violence prevention programs***. The evaluation identified five primary substance abuse and violence prevention programs used in Nevada public schools: D.A.R.E., Here's Looking at You 2000, Natural Helpers, Student Assistance Programs (SAP), and Counselor Programs. Ten of the 13 districts implemented at least three of these programs. Although D.A.R.E. was implemented by all 13 schools districts that participated in the evaluation, Here's Looking at You 2000 (implemented by eight school districts) should be considered the primary substance abuse prevention program in Nevada because it serves more students. It is implemented in many grade levels within each district, often grades K through 12. D.A.R.E., on the other hand, is typically implemented in just one or two grade levels within a district, e.g., grade 5.

- ***The effectiveness of the five primary prevention programs in Nevada is mixed.*** The five primary prevention programs in Nevada include an effective program, two promising practices, one program that is not effective, and one program that has not been researched. Here's Looking at You 2000 is considered an effective research-

[1] The 16 best practices include 12 related to curriculum and instruction and four related to support services and planning and implementation.

based program, but the research on D.A.R.E. has found only marginally positive results,[2] and must be considered not effective as a program. Both Student Assistance Programs and Counseling Programs are considered promising practices but researchers must conduct additional evaluation studies on them before their effectiveness can be determined. Natural Helpers has not been researched.

- ***Nevada schools districts use six other substance abuse prevention programs frequently.*** The evaluation identified six other programs that are used by at least four school districts in Nevada. The six programs include Positive Alternative Activities, Quest, Know Your Body, Project ALERT, Peer Mentoring Programs, and Summer Programs.

- ***The effectiveness of the other frequently used prevention programs in Nevada has not been completely determined. The potential effectiveness of these programs, however, is positive.*** Of the six other frequently used programs, two are effective research-based programs (Project ALERT and Know Your Body) and one is considered a promising practice (Positive Alternative Activities). The evaluation did not uncover research on the other three programs; however, the one commercial program (Quest) was analyzed as to whether it contained the 12 "curriculum and instruction best practices" in substance abuse prevention identified for this evaluation. Quest included most of the best practices. Together, the results suggest that the programs may produce positive results.

- ***Most school districts conducted fairly comprehensive needs assessments.*** The Safe and Drug-Free Schools and Communities Act requires school districts to conduct a comprehensive needs assessment. Most school districts fulfilled this requirement by examining local results on statewide surveys as well as collecting additional local data such as referrals, suspensions, expulsions, and dropout rates. In addition, many school districts implemented prevention programs to address their identified needs.

- ***Most districts did not conduct systematic evaluations of their substance abuse and violence prevention programs.*** All school districts identified program goals for their drug and violence prevention efforts as required by the SDFSCA program. In addition, most program goals were measurable. Most school districts, however, did not measure school district progress toward meeting program goals nor measure the effectiveness of programs or practices to identify areas for improvement.

The overall conclusion of the study is that Nevada school districts are similar to other school districts across the nation. While Nevada school districts implement some effective research-based programs and practices, most programs currently in place have not been evaluated properly.

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[2] Research on D.A.R.E. has found no effect for overall drug use and its effects were smaller when compared to 25 other programs. Research also found positive effects on tobacco, drug knowledge, and social skills.

The evaluation was unable to answer three important questions given the scope and short timeframe for the study. The evaluation was unable to link programs with outcomes, to determine whether programs are implemented consistently across schools and classrooms within each district, and whether each student receives an integrated, comprehensive substance abuse program from the various practices and programs that districts implement. Nevada and individual school districts must conduct a more comprehensive study to answer these three important questions.

Introduction

The 1997 Nevada State Legislature passed Assembly Bill 376 that calls for an evaluation of the effectiveness of substance abuse programs used in the public schools. AB 376 states that the evaluation must include a review of the results of all surveys and other information relating to the use of drugs and alcoholic beverages by pupils which has been collected by Nevada public schools over the last five years.

The purpose of the evaluation is to improve substance abuse programs in Nevada public schools, confirming that safe and drug-free schools are a priority in Nevada. The Nevada Department of Education (NDE), in consultation with educational personnel, counselors, pupils and parents will make recommendations on whether to eliminate or combine certain substance abuse programs to create a more effective substance abuse program for Nevada schools. NDE will submit those recommendations to the director of the Legislative Counsel Bureau who will convey them to the Nevada legislature. The report achieves an added purpose of determining whether Nevada public schools implement research-based programs in substance abuse and violence prevention—consistent with new federal initiatives.

Substance Abuse and Violence Prevention Funds in Nevada

The primary source of funds in Nevada[1] to help schools and communities develop substance abuse and violence prevention programs is the U. S. Department of Education (USDE). In 1987, Congress enacted the Drug-Free Schools and Communities Act to address the increased use of alcohol and other drugs among youth. The law was designed to encourage cooperation among schools, parents, communities, and other agencies in reaching the national goal of creating a drug-free society. As school safety also became a national concern, the program was reauthorized in 1994 as the Safe and Drug-Free Schools and Communities Act (SDFSCA) under Title IV of the Elementary and Secondary Education Act.[2]

The U.S. Department of Education administers the program and distributes funds to each state based on the number of school-aged youth residing within that state, except for minimum-funded states.[3] Approximately 80 percent of the funds authorized by the program are distributed to state educational agencies to support school-based programs. The remaining 20 percent of the funds are allocated to Governors' offices, or designees, to support either school- or community-based programs for youth.

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[1] In fact, the U.S. Department of Education is the primary source of funds for school-based drug prevention program in most states.

[2] This evaluation collected information on both substance abuse and violence prevention programs since SDFSCA is the primary funding source for both. The report identifies both the substance abuse and violence prevention programs in Nevada. The analysis of the effectiveness of the programs, however, focuses on substance abuse prevention programs.

[3] Nevada is a minimum-funded state and has received the minimum allocation since 1987 when the program was established. As a highly populated minimum-funded state, Nevada receives less Title IV funds per pupil than most other states.

The Nevada Department of Education receives 80 percent of the SDFSCA funds allocated to the state. NDE distributes 91 percent of the funds to local districts based on student enrollment and high incidence of violence and drug use[4] and uses 9 percent for administration and to provide training and technical assistance. The remaining 20 percent of state funds are awarded to the Bureau of Alcohol and Drug Abuse (BADA)—the Governor's designee—that funds community-based drug prevention programs through a competitive application process.

Table 1 shows the SDFSCA allocations for all 17 Nevada school districts. There are two types of SDFSCA allocations, "basic" and "greatest needs." All districts are eligible to receive a basic allocation determined by student enrollment. In Nevada, the per pupil basic allocation was $4.48. Nevada awarded $1,320,624 in basic allocations.

Table 1. Safe and Drug Free Schools and Communities Act
Allocations for Fiscal Year 1997-98

School District	Total Enrollment[5]	Basic Allocation	"Greatest Needs" Funds	Total Allocation
Carson City	8,478	$37,939		$37,939
Churchill	4,772	$21,355	$33,299	$54,654
Clark	188,480	$843,448	$352,786	$1,196,234
Douglas	7,336	$32,448		$32,448
Elko	10,590	$47,390		$47,390
Esmeralda*	123	$592		$592
Eureka*	332	$1,486		$1,486
Humboldt	4,046	$18,106		$18,106
Lander	1,820	$8,145	$28,165	$36,310
Lincoln*	1,108	$4,958		$4,958
Lyon	5,893	$26,375	$35,250	$61,625
Mineral	1,138	$5,093		$5,093
Nye**	4,969	$22,236		$22,236
Pershing	1,002	$4,484		$4,484
Storey	493	$2,206		$2,206
Washoe	52,602	$235,394	$116,480	$351,874
White Pine**	1,919	$8,588		$8,588
Totals	295,101	$1,320,624	$565,980	$1,886,604

* Did not apply for basic allocation.

** Applied for basic allocation, but was not awarded funds.

[4] Seventy percent of the funds are awarded to districts based on student enrollment and 30 percent are awarded to districts with high incidence of violence and drug abuse.
[5] Based on September 1996 enrollment figures and includes both public and private school students.

NDE awarded SDFSCA basic allocations to 12 school districts: three school districts did not apply for their basic allocation and two school districts submitted applications that were not funded.[6]

Nevada awarded $565,980 in "greatest needs" funds to five districts[7] with high incidence of substance abuse and violence. Each district received a minimum of $25,000 and $1.74 per child. The greatest needs funds raised the average per pupil allocation to $6.71 for the five school districts, ranging from $6.35 per pupil in Clark County to $19.95 per pupil in Lander County. In all, NDE awarded $1,886,604 in SDFSCA funds, or $6.40 per child—which is on the low end of the $6 to $8 per pupil range that SDFSCA awarded to states nationally during this period. To put these figures in context, a recent study concluded that $10 per pupil is inadequate for implementing the type of prevention programs that schools need (Research Triangle Institute 1997).

All school districts contributed some resources to prevention efforts; however, the amount of the resources was small in most cases. In addition, several agencies, (notably the County Sheriff's Departments[8]) contributed resources to substance abuse and violence prevention. The amount of funds that school districts and other agencies contributed to substance abuse and violence prevention programs in Nevada public schools was not available to be included in this evaluation report.

Organization of Report

The report includes four sections:

- Current trends in substance abuse and violence in Nevada public schools,
- "Best Practices" in substance abuse prevention programs,
- Substance abuse and violence prevention programs used in Nevada public schools, and
- Analysis of the effectiveness of substance abuse prevention programs and practices.

The report ends with findings and recommendations about substance abuse and violence prevention programs in Nevada.

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[6] The funds that were not awarded to the five districts were distributed to the other 12 districts.
[7] The greatest needs districts are the five districts most in need, or 10 percent of the districts most in need, whichever is greater.
[8] Most County Sheriff's Departments contributed resources for Drug Abuse Resistance Education-D.A.R.E.

Current Trends in Substance Abuse and Violence

The evaluation collected and reviewed the results from two statewide surveys administered over the last five years: Safe and Drug-Free Schools and Communities (SDFSCA) Student Survey and the Youth Risk Behavior Survey (YRBS).[9] NDE administered the SDFSCA Student Survey to students in grades 6, 8, 10, and 12 in 1994 and 1996[10], and administered the YRBS to students in grades 9 through 12 in 1993, 1995, and 1997. The results from these two surveys allowed us to identify state trends in student substance use and violent behaviors. In addition, we compared Nevada State survey results with national data, where available.[11]

As part of this evaluation effort, school districts were asked to submit any evaluation reports of their districts' substance and violence prevention programs. We did not, however, receive any evaluation reports. When interviewed about possible program evaluations, district coordinators reported that they did not formally evaluate their substance abuse and violence prevention programs. In fact, most districts did not collect data to determine whether the district had achieved the substance abuse and violence prevention program goals outlined in their SDFSCA applications.

Statewide Surveys

This section of the report presents data from the two statewide surveys on six topics—

- ✓ alcohol use,
- ✓ tobacco use,
- ✓ marijuana use,
- ✓ other drugs,
- ✓ anti-social behaviors, and
- ✓ unsafe vehicle behaviors.

The results from the two surveys are presented separately for each topic since the surveys ask, for the most part, different questions. Even in the case where the questions on each survey are the same, it is inappropriate to compare results across the two surveys since the surveys were administered to different groups of students in different years, using slightly different sampling methods. It is more important to compare the results from the administration of one survey with previous administrations of the same survey, e.g., the 1997 YRBS re-

[9] Copies of each of the five reports analyzed for this evaluation are available from the Nevada Department of Education.

[10] NDE began administering the SDFSCA Student Survey biennially in 1989; the survey was revised in 1994. NDE also administered the SDFSCA Student Survey in Spring 1998; however, State data will not be available until August 1998.

[11] We compared results on the 1996 SDFSCA Student Survey with national results on the 1996 *Monitoring the Future Study* with students in grades 8, 10, and 12. Although the 1997 YRBS was administered nationally, national results will not be available until September 1998.

sults are compared to the 1993 and 1995 YRBS results. Nevertheless, it is important to consider the results from each survey instrument when describing trends in substance abuse and violence prevention. As a rule for this evaluation, the report identifies a trend when the results from both surveys support the same claim. When the results from the two surveys differ, the evaluation report describes the results as mixed and presents the most recent evidence (i.e., the YRBS results) as supporting either an increase or decrease in a behavior, whatever the case may be.

Alcohol Use

Summary: The data from the two statewide surveys show:

- Alcohol is the most popular drug among Nevada students.
- The percentage of students who reported as having their first full drink by age 13 decreased over both surveys.
- The percentage of Nevada students who have had at least one drink (lifetime use) decreased on the YRBS. Lifetime alcohol use among Nevada students, however, is above the national level at grade 8 and slightly below the national levels at grades 10 and 12.

ALCOHOL USE		
BEHAVIOR	**COMPARISON**	
	Nevada	**National**
Onset of behavior	↑	***
Lifetime use	↑	↔
Frequent Use	↔	↓

Legend:

↑	= Positive
↓	= Negative
↔	= Mixed
***	= Not available

- The evidence on changes in "binge drinking" among Nevada students is mixed; however, the most recent survey suggests that binge drinking may be declining. Nevertheless, binge drinking among Nevada students is above the national average for students in grades 8, 10, and 12.
- The percentage of students who had at least one drink on school property increased 25 percent from 1995 to 1997.

SDFSCA Student Survey. The 1996 Survey showed that alcohol continues to be the most popular drug among Nevada students. Lifetime alcohol use was reported by more than a quarter of the students at grade 6 (28.4%), over half of students at grade 8 (59.8%), and approximately three-fourths of the students at grades 10 and 12 (71.2% and 77.6%, respectively). Lifetime alcohol use is above the national level at grade 8 and slightly below the national levels at grades 10 and 12. It is not possible to compare these results from previous year's results because of a change in the questions asked of students, i.e., from separate

questions on the use of beer, wine, and hard liquor in previous years' surveys to a single question on the use of alcohol in 1996.

The percentage of students who reported as having their first full drink by age 13 decreased from 1994 to 1996: Tenth graders reported a decrease from 40.2 percent to 36.4 percent and twelfth graders reported a decrease from 29.3 percent to 27.7 percent.

Students were also asked how often they had five or more drinks in a row (considered "binge drinking") in the two weeks preceding the survey. In 1996, 26 percent of tenth graders and 32.7 percent of twelfth graders acknowledged such "binge drinking" compared to 1994 results of 23.3 percent and 27.9 percent, respectively. The proportion of Nevada students having five or more drinks in a row in the two weeks prior to the survey exceeded the national averages at grades 8, 10, and 12.

YRBS Survey. The 1997 YRBS Survey confirmed that alcohol is the most popular drug among Nevada high school students with 79 percent having had at least one full drink of alcohol during their lifetime. Seventy-three percent of ninth-graders, 78 percent of tenth graders, 82 percent of eleventh graders, and 86 percent of twelfth graders drank alcohol at least once. These figures represent a 4 percent decrease in the percentages reported on 1995 YRBS Survey: 75 percent, 83 percent, 86 percent, and 90 percent, respectively. The 1997 lifetime alcohol use level, however, is above the 1993 level of 77 percent.

Thirty-seven percent of Nevada high school students had their first full drink of alcohol before the age of 13: 43 percent of ninth graders, 40 percent of tenth graders, 31 percent of eleventh graders, and 32 percent of twelfth graders. These figures represent a decrease of approximately 10 percent from the peak year of 1995 and are 2 percent below the 1993 levels.

The YRBS results showed a similar percentage of students (as the SDFSCA Survey) having had more than five drinks in a row or "binge drinking": 23 percent for ninth graders, 31 percent for tenth graders, 34 percent for eleventh graders, and 44 percent for twelfth graders. These figures, however, represent a 3 percent decrease since the 1995 YRBS Survey and are equivalent to figures reported on the 1993 YRBS Survey.

During 30 days prior to the survey, 8 percent of Nevada high school students had at least one drink of alcohol on school property: 8 percent of ninth graders, 9 percent of tenth graders, 7 percent of eleventh graders and 10 percent of twelfth graders. This represents a 25 percent increase over the 1995 YRBS Survey results.

Tobacco Use

Summary. The data from the two statewide surveys show:

- Smoking tobacco is the second most popular drug among Nevada students.
- The percentage of students who reported as having smoked a cigarette before the age of 13 decreased from 1995 to 1997.
- The evidence on changes in lifetime smoking among Nevada students is mixed. Increases for student use in grades 6, 8, and 12 have been matched by decreases for student use in grades 9, 10, and 11.
- The evidence on changes in daily smoking among Nevada students is also mixed; however, the most recent survey suggests that daily smoking may be declining among Nevada students. The level of daily use of smoking tobacco is below the national levels for grades 8, 10, and 12.
- Lifetime use of chewing tobacco continues to be substantially below cigarette smoking, and has decreased for all grades, except grade 12, over the last few years. The level of daily use of chewing tobacco has also decreased for all grade levels over the past few years.
- The percentage of students who smoked on school property decreased 14 percent from 1995 to 1997.

TOBACCO USE		
BEHAVIOR	**COMPARISON**	
	Nevada	**National**
Onset of behavior		
◆ **Smoking**	↑	***
◆ **Chewing**	***	***
Lifetime use		
◆ **Smoking**	↔	↑
◆ **Chewing**	↑	↑
Frequent Use		
◆ **Smoking**	↔	↑
◆ **Chewing**	↑	↑

SDFSCA Student Survey. The 1996 SDFSCA Student Survey continued to show that cigarette smoking ranked second in popularity to alcohol use among Nevada students at all four grade levels. From 1994 to 1996, the proportion of students who had ever smoked a cigarette increased significantly at grades 6 and 8 while remaining fairly stable at grades 10 and 12. That is, lifetime prevalence of smoking increased by 50 percent among six graders (from 9% to 13.5%) and rose by 13.5 percent among eighth graders (from 31.8% to 36.1%). Over the same period, the proportion of students who had ever smoked dropped by less than one-half of a percent at grade 10 (from 42.3% to 42.9%) and increased by 2.2 percent at grade 12 (from 45.2% to 46.2%).

Daily smoking showed increases at all four grade levels from 1994 to 1996, more than doubling among Nevada sixth graders. Both lifetime and daily use measures showed that smok-

ing among Nevada youth in grades 8, 10 and 12 to be considerably below the national average.

Chewing tobacco continues to be less popular than smoking tobacco among Nevada youth. In addition, the proportion of students who had ever used chewing tobacco or used chewing tobacco daily declined at all four grade levels from 1994 to 1996. Compared with national statistics, only half as many Nevada students in grades 8 and 10 have ever tried chewing tobacco, and only two-thirds as many seniors report lifetime use as their counterparts across the nation.

YRBS Survey. The 1997 YRBS Survey results confirm the results from the SDFSCA Student Survey for lifetime and frequent cigarette smoking. In terms of lifetime smoking, 69 percent of Nevada high school students have tried smoking tobacco, 62 percent of ninth graders, 68 percent of tenth graders, 70 percent of eleventh graders and 77 percent of twelfth graders. Overall, this represents a 5 percent decrease in lifetime smoking from the peak year of 1995, even though lifetime smoking increased by 3 percent among twelfth graders. The lifetime use reported in 1997 represents only a slight increase in lifetime use reported by students on 1993 YRBS Survey.

The 1997 YRBS also reported decreases in frequent cigarette smoking. Overall, daily cigarette smoking decreased by 14 percent from 1995 to 1997, but it is essentially level with the level reported on the 1993 YRBS Survey.

Twenty-three percent of high school students smoked a cigarette for the first time before the age of 13: 27 percent of ninth graders, 25 percent of tenth graders, 19 percent of eleventh graders, and 21 percent of twelfth graders. The percentage of students who had smoked a whole cigarette before the age of 13 dropped more than 18 percent from the peak year of 1995, and is 17 percent below the 1993 level.

During the 30 days prior to the survey, 15 percent of Nevada students smoked cigarettes on school property: 10 percent of ninth graders, 15 percent of tenth graders, 18 percent of eleventh graders, and 17 percent of twelfth graders. The percent of students who smoked on school property decreased by 14 percent since the peak year of 1995, and is essentially level with 1993 results.

The proportion of Nevada students who use chewing tobacco is substantially below cigarette smoking. Lifetime use of chewing tobacco was 7 percent for ninth graders, 8 percent for tenth graders, 9 percent for eleventh graders, and 15 percent for twelfth graders. Overall, these figures represent a 9 percent decline in the use of chewing tobacco from 1995 to 1997 even though use by twelfth graders increased a third.

The percentage of students who used chewing tobacco daily in 1997 was 2.1 percent, down from the 2.5 percent reported in 1995.

Marijuana Use

Summary. The data from the two statewide surveys show:

- Marijuana is the third most frequently used drug among Nevada students: ranging in use from 3.3 percent among sixth graders to 58 percent among twelfth graders.
- The percentage of students who tried marijuana for the first time before age 13 decreased slightly from 1995 to 1997.

MARIJUANA USE		
BEHAVIOR	**COMPARISON**	
	Nevada	**National**
Onset of behavior	↑	***
Lifetime use	↔	↓ (8,10)
Frequent Use	↓	↓ (8,10,12))

- The level of lifetime marijuana use is mixed, i.e., the 1996 SDFSCA showed increased lifetime use but the 1997 YRBS showed decrease use at grades 9 and 10, a leveling off at grade 11, and a continued increase in use at grade 12. Lifetime use among Nevada students exceeds national levels for grades 8 and 10.
- The level of daily use has increased substantially over the last few years at all grade levels, and it exceeds national levels at grades 8, 10, and 12.
- The level of use of marijuana on school property increased slightly from 1995 to 1997.

SDFSCA Student Survey. The 1996 Student Survey shows that marijuana use among Nevada students continues to be lower than use of alcohol or tobacco; however, it was closer in 1996 than in previous years. In fact, it increased so substantially, that lifetime prevalence among Nevada students exceeded national levels at grades 8 and 10, and daily use of marijuana was higher than the national rate at grades 8, 10, and 12.

From 1994-96, lifetime use of marijuana nearly doubled among six graders from 3.3 percent to 6.1 percent. Lifetime use among eighth graders increased by nearly three-fourths, from 16.5 percent to 28.8 percent. The increases among tenth and twelfth graders were smaller, but significant. Lifetime use at grade 10 climbed from 34 percent to 40.3 percent and climbed from 36.7 percent to 42.2 percent at grade 12.

The results show similar increases in frequent use (i.e., at least 6 times in the last year) and daily use. From 1994 to 1996, frequent use nearly tripled in grade 6, more than doubled at grade 8, and rose by one-fourth at grades 10 and 12. Daily use showed even greater rates of increase, especially at grades 6 and 8.

YRBS Survey. The 1997 YRBS results showed that nearly half (46%) of Nevada high school students have used marijuana at least once in their life: 33 percent, 46 percent, 52 percent and 58 percent for students in grades 9 through 12 respectively. These figures represent a sub-

stantial improvement for grades 9 and 10 (from 40% to 33 % for grade 9 and 50% to 46% for grade 10). However, survey results show the same percentage of eleventh grade students reporting lifetime use (52%) from 1995, and a substantial increase for twelfth graders from 1995 to 1997 (50% to 58%). Overall, the figures represent a 3 percent decrease from 1995, but are substantially above the 36 percent lifetime use reported in 1993.

Ten percent of Nevada students tried marijuana prior to the age of 13: 12 percent of ninth graders, 13 percent of tenth graders, and 7 percent each of eleventh and twelfth graders. These figures represent a 2 percent decrease in the percentage of students who had tried marijuana before age 13 in 1995, but are still above the 9 percent reported by students in 1993.

Although the YRBS does not ascertain daily use, the survey asked students how many times they had used marijuana over the last 30 days. Overall, 7.4 percent of students reported using marijuana 20 or more times in the previous 30 days. The figure represents a significant increase over the 6.1 percent of students who reported that frequency of use in 1995, and an even greater increase over the 4.5 percent who reported that level of use in 1993.

During the 30 days prior to the survey, 10 percent of Nevada high school students used marijuana on school property, ranging from 7 percent of ninth graders to 12 percent of tenth graders. This represents a 3 percent increase in students using marijuana on school property since 1995, and a 24 percent increase over the 1993 survey levels.

OTHER DRUGS		
BEHAVIOR	**COMPARISON**	
	Nevada	**National**
Onset of behavior		
♦ **Cocaine**	↑	***
♦ **Inhalants**	***	***
♦ **Steroids**	***	***
♦ **Others (hallucinogens, opiates, speed)**	***	***
Lifetime use		
♦ **Cocaine**	↓	↓
♦ **Inhalants**	↔	↑
♦ **Steroids**	↔	***
♦ **Others (hallucinogens, opiates, speed)**	↔	↔
Frequent Use		
♦ **Cocaine**	↔	***
♦ **Inhalants**	↔	***
♦ **Steroids**	↔	***
♦ **Others (hallucinogens, opiates, speed)**	↔	***

Other Drugs

Summary. The data from the two statewide surveys show:

- The level of use of most other drugs is relatively low among Nevada students.
- The level of lifetime use of all forms of cocaine has increased substantially in almost every grade level on the two surveys. The prevalence rates among Nevada youth surpass national prevalence rates. The results on the frequent use of cocaine are mixed: data suggest that frequent use may have peaked in 1995-96 and is now decreasing.

- The level of lifetime use of inhalants has increased for the middle school grades (6 and 8) but has decreased at high school (grades 9 through 12). In addition, Nevada lifetime use levels are lower than the national levels. The frequent use of inhalants is mixed, with the more recent YRBS survey results showing a decrease.

- The use of steroids continues to be low and lifetime use decreased slightly. The frequent use of steroids was relatively stable.

- The evidence of the lifetime and frequent use of hallucinogens, stimulants, and opiates is mixed. The SDFSCA reported increases at all grade levels while the YRBS reported decreases. The results from the two surveys suggest that the use of these drugs peaked and is now decreasing.

- The use of over-the-counter drugs peaked at 12.8 percent in 1996 at grade 10, up from 11.1 percent in 1994.

SDFSCA Student Survey. The 1996 results showed mixed progress on the use of inhalants from 1994 to 1996. The trend toward the increase use of inhalants, such as glue, aerosol, and solvents that occurred in all grade levels in 1994, continued in grades 6 and 8 but decreased in grades 10 and 12. From 1994 to 1996, lifetime use of inhalants almost doubled among six graders (from 4.8% to 8.2%) and increased by more than a third among eighth graders (from 15.2% to 20.9%). On the other hand, the reported lifetime use of inhalants by tenth and twelfth graders dropped significantly (from 19.2% to 12.8%, and from 14.5% to 11.2%, respectively). In fact, inhalant use among Nevada youth is considerably lower than national levels at grades 10 and 12, and slightly below the national level at grade 8. The frequent use of inhalants (weekly and daily) increased considerably from 1994 to 1996.

The 1996 Student Survey also showed that the use of hallucinogens (such as LSD, PCP, and magic mushrooms), stimulants (including amphetamines, speed, and crystal), and all forms of cocaine rose at all four grade levels since 1994. The increases were significant for all three substances at grades 6 and 8 and for cocaine at grade 10. Prevalence rates among Nevada youth surpassed national ones for cocaine and hallucinogens but fall below national levels for stimulants. The frequent use of all forms cocaine (weekly or daily) also increased considerably from 1994 to 1996, and students reported slight increases in frequent use of stimulants and hallucinogens.

In addition, the 1996 Student Survey showed that the use of over-the-counter drugs, depressants, steroids, and opiates remained relatively stable since 1994. The only exception was that the lifetime prevalence of using over-the-counter drugs to get high peaked at 12.8 percent at grade 10 in 1996, up from 11.1 percent in 1994. Otherwise, the proportions of youth using drugs in the other three classes (depressants, steroids, and opiates) ranged from a low of 1.1 percent to a high of 6.9 percent. The frequent use (weekly or daily) of these drugs was mixed: students reported a slight increase in the frequent use of depressants and opiates, but stable rates for frequent steroid use.

YRBS Survey. Although the 1997 YRBS results showed a substantially higher percentage of students inhaling substances to get high than the SDFSCA Student Survey, the YRBS results confirm the SDFSCA results that lifetime use of inhalants among Nevada high school students has decreased. In addition, the results show decreases in all levels of use of inhalants, including frequent use, from 1995 to 1997.

The 1997 YRBS also showed an increase in the use of different kinds of cocaine from 1995 and 1993. More than one out of every ten Nevada high school students (12.8%) has used some form of cocaine at least once during their life. Overall, lifetime use of cocaine rose 11 percent from 1995 to 1997, having almost doubled among twelfth graders. Only eleventh graders showed no increase in use. In addition, the percentage of students reporting cocaine use 30 days prior to the survey was 5.5 percent, up 12 percent from the 4.9 percent in 1995. Students in grades 9, 11, and 12 showed substantial increases, the increase among twelfth graders leading the way at 80 percent. Finally, 8 percent of Nevada high school students have used the crack or freebase form of cocaine one or more times during their life—an increase of 13 percent since 1995. All grade levels except grade 9 showed a substantial increase and the use almost doubled among students in grade 12. Frequent use of cocaine, defined as having used any form of cocaine at least 10 times in the 30 days prior to the survey, however, decreased from 1.7 percent in 1995 to 1.2 percent in 1997.

Overall, 2 percent of high school students tried some form of cocaine before the age of 13: 2.2 percent of ninth graders, 1.5 percent of tenth graders, 1.9 percent of eleventh graders, and 2.3 percent of twelfth graders. The percentage of students who first tried cocaine before they were 13 dropped 20 percent since 1995 but is still greater than the 1.0 percent reported by students in 1993.

Approximately one-fifth of Nevada high school students (19.9 %) have used some type of illegal drug other than marijuana or cocaine during their life. Since 1995, the percent use of other drugs among Nevada students dropped two percent but is still higher than the 1993 level of 18.5 percent. The frequent use of these drugs (defined as having used the drug more than 20 times in their lifetime) dropped considerably from 7.2 percent in 1995 to 5 percent in 1997.

The level of Nevada high school students who took steroids without a doctor's prescription remained relatively low at 3.4 percent. The lifetime use of steroids dropped 3 percent since 1995 but remains higher than the 1993 level of 2.7 percent. The frequent use of steroids (i.e., using the drug more than 20 times in their lifetime) increased from .7 percent in 1995 to .9 percent in 1997.

Anti-Social Behaviors

Summary. The data from the two statewide surveys show:

- Approximately 28 percent of middle school students and 15 percent of high school students were involved in at least one physical fight on school property during the 12 months preceding the two surveys.
- The percentage of students involved in at least one physical fight on school property has decreased since 1993, but the percentage of students who fight frequently remained about the same.

ANTI-SOCIAL BEHAVIORS		
BEHAVIOR	**COMPARISON**	
	Nevada	**National**
Lifetime use		
◆ **Fighting**	↑	***
◆ **Weapons**	↑	***
Frequent Use		
◆ **Fighting**	↔	***
◆ **Weapons**	↔	***

- Approximately 7 percent of middle school students and 10 percent of high school students brought weapons to school in the 30 days prior to the administration of the two surveys. The percentage of students who engaged in this behavior has decreased since 1993, but the percentage of students who brought a weapon to school frequently remained about the same.

SDFSCA Student Survey. The 1996 Student Survey was the first year that the survey collected data on anti-social behavior. The results show that one out of four Nevada students in grades 6 and 8 admit to having been involved in at least one physical fight on school property during the twelve months prior to the survey (29.3% and 27.8%, respectively). Fighting is less common at the high school level where 17.4 percent of tenth graders and 13 percent of twelfth graders claim to have been in a fight at school during the previous year. In addition, frequent fighting on school property (6 or more times in the 30 days prior to the survey) occurred substantially less than the occasional fight: 2.2 percent, 2.4 percent, 1.2 percent, and .8 percent for students in grades 6, 8, 10, 12 respectively.

The survey results also show that at grades 8 and 10, one in ten students (11.8% and 10.1%, respectively) claims to have carried a weapon such as a gun, knife, or club on school property in the 30 days preceding the survey. Sixth and twelfth graders were less likely to bring weapons to school (5.6% and 8.6% respectively). Twelfth graders, however, were more likely (5.7%) to bring a weapon on school property frequently (6 or more times in the previous 30 days) as compared to sixth graders (1.1%), eight graders (3.6%), and tenth graders (4.7%). In other words, a smaller percentage of twelfth grade students brought weapons to school, but those that did, brought them frequently.

YRBS Survey. The 1997 YRBS Survey reports results similar to the SDFSCA Student Survey in terms of participating in fights and carrying a weapon on school property. Approximately

15 percent of Nevada high school students were in a physical fight on school property at least once during the year prior to the survey. Twenty percent of ninth graders, 15 percent of tenth graders, 13 percent of eleventh graders, and 11 percent of twelfth graders fought on school property in the preceding year. The incidence of physical fighting on school property decreased by 21 percent since 1995 and by 24 percent since 1993. The percentage of students engaged in frequent fighting (6 or more times in the 12 months prior to the survey) was small (1.3 percent) and did not change much since 1995 (1.4 percent).

Ten percent of Nevada high school students carried a weapon on school property during the month prior to the survey: 10 percent of ninth graders, 11 percent of tenth graders, 9 percent of eleventh graders, and 10 percent of twelfth graders. This continues a decrease for the last four years: 9 percent below the 1995 level and 16 percent below the 1993 level. Nevertheless, while these figures show improvement, six percent of Nevada high school students stayed home from school at least once during the month preceding the survey because they felt they would be unsafe at school or on their way to or from school. The percentage of students (4.7) who brought a weapon to school frequently (6 or more times in the 30 days prior to the survey) did not change since 1995, but is below the 1993 level of 5.7 percent.

Unsafe Vehicle Behaviors

Summary. The data from the two statewide surveys show:

- Approximately 21 percent of middle school students and 33 percent of high school students reported that they rode in a car or other vehicle driven by someone who was under the influence of alcohol or other drugs one or more times in the 30 days preceding the surveys.

UNSAFE VEHICLE BEHAVIORS		
BEHAVIOR	**COMPARISON**	
	Nevada	**National**
Lifetime use		
• **Passenger**	↑	•••
• **Driver**	↓	•••
Frequent Use		
• **Passenger**	↔	•••
• **Driver**	↓	•••

- The 1997 prevalence rate dropped about 10 percent from 1995 and is about 5 percent below the 1993 level. Students who engaged in this behavior frequently remained stable from 1995 to 1997.

- Approximately 15 percent of high school students reported driving a car or other vehicle while under the influence of alcohol or other drugs.

- The percentage of students who drove under the influence at least once in the 30 days prior to the survey increased over the last few years. In addition, the percentage of students who engaged in this behavior frequently increased since 1995.

SDFSCA Student Survey. The 1996 Student Survey was the first year that the Survey collected information on unsafe vehicle behaviors. The results showed that 14.8 percent of sixth

grade students reported that they rode in a car or other vehicle driven by someone who was under the influence of alcohol or other drugs one or more times in the 30 days preceding the survey. By eighth grade, the percentage of students reporting the behavior nearly doubled to 28.3 percent and climbed to 32.3 percent by grade 10 and to 38.5 percent by grade 12. The percentage of students who engaged in this behavior frequently (6 or more times) was 3.3 percent for sixth grade students, 5.6 percent for eight graders, 7.3 percent for tenth graders, and 9.5 percent for twelfth graders.

Driving while under the influence was far less common than riding with a driver who had been drinking or using other drugs. Yet by grade 12, one in five students (21.6%) reported having done so one or more times in the 30 days prior to the survey. The percentage of students who drove under the influence frequently (6 or more times in the 30 days preceding the survey) was .5 percent for sixth graders, 1.1 percent for eighth graders, 2.2 percent for tenth graders, and 4.7 percent for twelfth graders.

YRBS Survey. The results of the 1997 YRBS Survey showed that, overall, 33 percent of Nevada students rode in a car or another vehicle with a driver who had been drinking alcohol during the 30 days prior to the survey. The prevalence rates were 27 percent for ninth graders, 35 percent for tenth grades, and 36 percent and 38 percent for grades 11 and 12 respectively. Overall, the percentage of students who rode in a car in the 30 days preceding the survey with a driver who had been drinking alcohol dropped about 10 percent from 1995. The percentage of students who engaged in this behavior frequently (6 or more times in the 30 days preceding the survey) was 6.4 percent in 1997 which is essentially the same as reported in 1995 (6.5 percent), but represents a decrease from the 7.7 percent who reported the behavior in 1993.

The 1997 YRBS also reported that driving while under the influence was far less common than riding with someone who had been drinking or had taken other drugs. That is, 15 percent of Nevada high school students reported that they drove a car or other vehicle when they had been drinking alcohol during the 30 days preceding the survey. Although this represents a 7 percent increase over 1995 (and continues the increase started in 1993), the increase was largely due to a reported increase of 61 percent by eleventh grades. Ninth and tenth graders, on the other hand, reported a decrease. The percentage of students who drove under the influence frequently (i.e., 6 or more times in the 30 days prior to the survey) was 2.4 among Nevada high school students in 1997, which represents an increase from the both the 1993 and 1995 level of 1.8 percent.

Best Practices and Effective Programs in Substance Abuse Prevention

The research literature on school-based substance abuse prevention is relatively new. The research community, however, has begun to identify best practices, and more recently, effective programs, in substance abuse prevention. The evaluation gathered and compiled the latest research on effective practices and programs from the Office of Educational Research and Improvement, U.S. Department of Education, the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, as well as research journals and summaries. After we reviewed and summarized the research, we developed a list of ***best practices*** and ***effective programs*** that we could use as a tool for evaluating the degree to which Nevada schools implement best practices and programs in substance abuse prevention.

Best Practices in Drug Prevention

Program Curriculum and Instruction

- Social resistance skills
- Normative education
- Life skills
- Developmentally appropriate curriculum
- Duration and intensity of program
- Cultural relevance
- Parent and community involvement
- Appropriateness for target population
- Curriculum infusion
- Instructional strategies
- Staff training
- Comprehensive materials

Program Support and Planning

- Support services
- Planning and implementation
- Implementation of core program components
- Program monitoring and evaluation

Best Practices

There is a growing body of research on the most effective approaches or "best practices" in school-based programs designed to prevent drug and alcohol use by youth. Much of this research suggests that many schools do not use these findings when selecting prevention programs and rely instead upon other information sources such as advertising and marketing by commercial programs. The purpose of this section is to identify what researchers have determined to be the current best practices in selecting, implementing, and maintaining effective school-based alcohol and drug prevention programs. This information will allow practitioners to compare their programs to the best practices and can serve as a starting point in the redesign of an existing program or in the selection of a new one.

The drug prevention research literature includes numerous studies that have identified ***"best practices"— strategies and methods that research has shown to help in achieving desired goals.*** Many of these best practices are addressed in effective school-based drug prevention programs. This

report presents 16 best practices in drug prevention programs frequently reported in the research literature.[12]

Below is a list of the 16 best practices and a short narrative about the practice. The first 12 best practices are directly related to *program curriculum and instruction*. The final four practices address the *support services* available in the school and how the program is *selected, implemented, and evaluated*.

Program Curriculum and Instruction

1. ***Social Resistance Skills*** An important step in preventing drug use is to provide students with skills in resisting peer pressure and to rely upon their own judgements.

2. ***Normative Education*** Many students overestimate the number of their peers who use drugs. Normative education teaches students that most people do not in fact use drugs.

3. ***Life Skills*** Life skills include a broad range of self-management skills that students need to develop personal and social competencies, such as decision making, communication skills and stress management.[13]

4. ***Developmentally Appropriate Curriculum*** Program content and activities should be appropriate to the developmental level of the students. The materials used should match the interest and maturity levels of students.

5. ***Duration and Intensity of Program*** Prevention programs should be of sufficient duration to make a difference. All programs should provide multiple years of intervention with at least 10 to 15 sessions in one year and another 10 to 15 booster sessions in later years.

6. ***Cultural Relevance*** Prevention programs should be relevant to the needs of cultural groups represented in the school. Materials should be made available to students in appropriate languages and should reflect the cultural norms of the target populations.

7. ***Parent and Community Involvement*** Programs should have a parent or community component to help tie school prevention activities to the home and community.

8. ***Appropriateness for Target Population*** Programs should be geared to the identified needs of target students. Not all programs work equally well for all groups of students.

9. ***Curriculum Infusion*** Curriculum infusion refers to the technique of integrating the teaching of one curriculum area into another. When done properly, students make better connections between concepts taught in one subject area with concepts taught in another.

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[12] We selected the 16 best practices from original research studies, summaries of the research, and conclusions drawn from the research literature.

[13] Special events such as drug-free dances, Red Ribbon Week, and other school activities have shown to be effective when combined with other interventions such as social resistance, normative education, and life skills.

10. ***Instructional Strategies*** Many of the components used in effective drug prevention programs require teaching methods (e.g., interactive methods such as role playing, small-group discussion, and use of peer leaders) that differ significantly from the traditional didactic methods used by many teachers.

11. ***Staff Training*** Research has consistently shown that sufficient staff development delivered by prevention experts can be effective in helping prepare teachers to deliver effective prevention instruction to students.

12. ***Comprehensive Materials*** Student materials should be comprehensive, factual, interesting, and appropriate to their developmental levels. Teacher materials should be complete, easy to follow, and provide information on the purpose of activities, time required, and which lessons are most important when instructional time needs to be shortened.

Program Support and Planning

13. ***Support Services*** Classroom based prevention programs that are combined with support services such as counseling or Student Assistance Programs tend to be more effective.

14. ***Planning and Implementation*** Pre-implementation planning is important to ensure that the prevention program selected will meet the needs of students and the community. Researchers have suggested the following planning steps to ensure that the district selects an appropriate program: (1) assess student needs; (2) set priorities; (3) review relevant research; (4) select strategies; and (5) provide needed leadership and training.

15. ***Implementation of Core Program Components*** In order to be most effective, the core components including the content, structure, and delivery of research-based programs must be implemented as completely as possible.

16. ***Program Monitoring and Evaluation*** Monitoring and evaluation of the prevention program is an important activity to determine if program components are being implemented as planned and if program goals are met. Program staff should modify the program based on monitoring and evaluation results.

In addition to the 16 best practices identified from the research literature, the United States Department of Education has recently announced four *Principles of Effectiveness* to take effect on July 1, 1998. These four principles will govern recipient's use of funds received under Title IV—Safe and Drug-Free Schools and Communities Act—beginning in fiscal year 1998. The four principles are:

Principle 1: Conduct Local Needs Assessment A grant recipient shall base its program on a thorough assessment of objective data about the drug and violence problems in the schools and communities served.

Principle 2: Set Measurable Goals and Objectives A grant recipient shall with the assistance of a local or regional advisory council, which includes community repre-

sentatives, establish a set of measurable goals and objectives, and design its activities to meet those goals and objectives.

Principle 3: Implement Effective Research-Based Programs A grant recipient shall design and implement its activities based on research or evaluation that provides evidence that the strategies used prevent or reduce drug use, violence, or disruptive behaviors.

Principle 4: Conduct Program Evaluation A grant recipient shall evaluate its program periodically to assess its progress toward achieving its goals and objectives. Grant recipients will use the evaluation results to refine, improve, and strengthen its program and to refine its goals and objectives as appropriate.

These four principles support and are consistent with the more comprehensive list of best practices identified for this evaluation report. The main difference between the two lists is that the NDE Best Practices more thoroughly describe the types of practices involved in effective research-based programs. Table 2 presents the correspondence between USDOE Principals of Effectiveness and NDE Best Practices.

Table 2 Correspondence Between USDOE's "Principles of Effectiveness" and NDE's "Best Practices"

USDOE "Principles of Effectiveness"	**NDE "Best Practices"**
Conducting Needs Assessments	♦ Planning the Implementation
Setting Measurable Goals and Objectives	♦ Program Monitoring and Evaluation
Effective Research Based Programs	♦ Social Resistance Skills ♦ Normative Education ♦ Life Skills ♦ Developmentally Appropriate Curriculum ♦ Duration and Intensity of Program ♦ Cultural Relevance ♦ Parent and Community Involvement ♦ Appropriateness of Target Population ♦ Curriculum Infusion ♦ Instructional Strategies ♦ Staff Training ♦ Comprehensive Materials ♦ Support Services
Program Evaluation	♦ Program Monitoring and Evaluation

Effective Programs

The research literature has also begun to identify effective substance abuse and violence prevention programs. An effective program is one that meets its objective in terms of producing positive outcomes. That is, the program demonstrates effectiveness in—

- ✓ Preventing or reducing substance abuse or violent or disruptive behavior;
- ✓ Changing the knowledge, attitudes, and beliefs that lead to substance abuse and violent behavior; or
- ✓ Promoting and strengthening behaviors and skills, such as good interpersonal skills, that are associated with preventing substance abuse and violent behavior.

Ideally, the program also demonstrates a sustained effect and produces positive outcomes that are generalizable to populations other than the ones with which it was tested (Scattergood, Dash, Epstein, & Adler, 1998). To determine whether a program is effective, it must be research-based or evaluated. While the field of measuring the effectiveness of substance abuse and violence prevention programs is still young, several recent publications have begun to identify effective programs. The most comprehensive of these publications is *Applying Effective Strategies* which was funded under a grant from the Safe and Drug-Free Schools Program. The booklet was produced to help schools implement the USDOE *Principles of Effectiveness*, reported earlier.

Applying Effective Strategies identifies 52 research-based programs that are considered either effective or promising. ***Effective programs*** *were identified as either having consistently produced positive results or programs where certain aspects of the program produced desired changes in knowledge, attitudes, practices and skill as reported in the research literature.* ***Promising programs*** *were programs recognized publicly and have appeared in a professional journal or publication, but have not been fully evaluated and/or the evaluation results are pending.* See Appendix A for a complete listing of the effective and promising programs in this publication.

The evaluation also consulted other publications to identify effective programs or to identify the results of evaluations of substance abuse and violence prevention programs: *Making the Grade: A Guide to School Drug Prevention Programs* (1996); *Preventing Drug Use Among Children and Adolescents: A Research-Based Guide* (1997); and *Safe Schools, Safe Students: A Guide to Violence Prevention Programs* (1998). Information from all of these documents was used to help determine the effectiveness of substance abuse and violence prevention programs used in Nevada public schools.

Substance Abuse and Violence Prevention Curricula and Programs

In April 1998, the Nevada Department of Education developed and distributed a survey instrument to collect information from all 17 school districts about their substance abuse and violence prevention programs.[14] (See Appendix B for a copy of the survey instrument used to collect data from school districts.) Thirteen of Nevada's 17 school districts completed the survey: 11 of the 12 Nevada school districts that received funds from the Title IV Safe and Drug-Free Schools and Communities Act Program and two of the five school districts that did not receive Title IV funds.

> ✓ ***Finding***
>
> *Nevada schools use a wide variety of commercial, locally-developed, and general program models in substance abuse and violence prevention.*

The results show that Nevada public schools use a wide variety of substance abuse and violence prevention programs. In all, school districts reported using 55 substance and violence prevention programs in 1997-98 including 23 commercial programs,[15] 11 general program models,[16] and 21 locally developed programs.[17] The programs were further divided into three categories, recently adopted by the prevention field, which describe the program by the audience for which they are designed: *universal* programs, *selective* programs, and *indicated* programs. *Universal* programs reach the general population such as all students in a school. *Selective* programs target groups at-risk or subsets of the general population such as children of drug users or poor school achievers. *Indicated* programs are designed for people who are already using drugs or who exhibit other risk-related behaviors. Of the 55 programs, 42 are universal, 10 are selective, and 3 are indicated.[18]

Table 3
Substance Abuse and Violence Prevention Programs in Nevada

Type of Program	Program Category		
	Universal	**Selective**	**Indicated**
Commercial (23)	22	1	--
General model (11)	6	4	1
Locally-developed (21)	14	5	2
Total (55)	**42**	**10**	**3**

[14] Much of the data collected for this evaluation served a second purpose, i.e., to monitor schools participating in the Title IV Safe and Drug-Free Schools and Communities Act.
[15] Most commercial programs include curricula that focus on specific topics in substance abuse and violence prevention.
[16] General program models are programs that have common features but no specific curriculum, such as after-school activities or peer mentoring programs.
[17] Locally developed programs include a wide range of activities and services. Although some may have developed curriculum, most locally developed programs do not.

Tables 4a, 4b, and 4c in Appendix C lists the 55 substance abuse and violence prevention programs for each of the three types of programs according to the grade levels in which each district implemented them. It is important to emphasize that the 55 programs is not a complete list of the substance abuse and violence prevention programs used in Nevada public schools. The 55 programs represent the programs reported by Title IV coordinators and school district representatives. Several district Title IV coordinators noted that they did not know all of the programs implemented by individual schools since schools have the flexibility to implement programs to meet individual school needs. In addition, this evaluation report does not include information from four Nevada school districts.

> ✓ ***Finding***
>
> *Most substance abuse and violence prevention programs in Nevada are universal programs rather than selective and indicated programs.*

School districts reported implementing from 4 to 22 different substance abuse and violence prevention programs. Most school districts, however, identified three or four programs that comprised the largest part of their substance abuse and violence prevention efforts. Most school district prevention efforts included multiple components that combined classroom instruction with support services such as Student Assistance Programs and Counseling Programs. The primary substance abuse and violence prevention programs for each district are marked with an asterisk "*" in Tables 4a, 4b, and 4c in Appendix C.

> ✓ ***Finding***
>
> *Most schools districts implemented prevention efforts that included multiple components.*

Common Substance Abuse and Violence Prevention Programs

The results also show that school districts implemented five programs considerably more often than other programs. Table 5 shows the five key substance abuse and violence prevention programs used in Nevada public schools. In fact, 10 of the 13 school districts implement at least three of these five key programs. The five programs are D.A.R.E., Natural Helpers, Here's Looking at You 2000, Student Assistance Programs (SAP), and Counseling Programs. Three of the five programs (D.A.R.E., Natural Helpers, Here's Looking at You 2000) are universal programs. The two other programs (Student Assistance Programs and Counseling Programs) are either selective or indicated programs depending on how the district implemented the program. Even though both D.A.R.E. and Natural Helpers are implemented in more school districts than Here's Looking at You

> ✓ *Finding*
>
> *Nevada school districts use five primary substance abuse and violence prevention programs: D.A.R.E., Here's Looking at You 2000, Natural Helpers, Student Assistance Programs (SAP), and Counseling Programs.*

[18] Some programs may serve more than one audience depending how the program is implemented locally.

2000, the later serves more students because it serves more grade levels than the other two programs. For all intents, Here's Looking at You 2000 is the primary substance abuse prevention program in Nevada. Below is a brief description of these five key programs.

Table 5

Common Substance Abuse and Violence Prevention Programs in Nevada, n=13

Prevention Program	Number of School Districts	Grade Levels
D.A.R.E	13	5-6
Natural Helpers	10	6-12
Here's Looking At You 2000	8	K-12
Counseling Programs	8	K-12
Student Assistance Programs	7	K-12

- ✓ ***D.A.R.E. (Drug Abuse Resistance Education)***—D.A.R.E. is a universal, commercial K-12 drug prevention program taught by uniformed police officers with a curriculum that covers smoking, drinking, and drugs. The program provides 17 core lessons in the 5th and 6th grades (the grades in which the program is typically implemented in Nevada). The core lessons, revised in 1994, cover important prevention elements, including skill development. The program also includes student anti-drug essays and a graduation ceremony.

- ✓ ***Here's Looking at You 2000***—The program is a universal, commercial K-12 drug prevention program that provides personal and social skills training curriculum emphasizing cooperative learning. The program includes 15 to 30 lessons per year and includes extensive background information for teachers. It covers refusal skills and teaches social resistance skills within the context of personal and social skills training. It includes interesting activities and role-playing. In Nevada, many school districts implemented the program to address substance abuse issues in the Nevada Health Course of Study for a grade span, e.g., K-6, K-8, K-12.

- ✓ ***Natural Helpers***—Natural Helpers is a universal program that is based on the premise that teens in trouble are most likely to turn to their peers for assistance. Natural Helpers builds on the peer relationship by training groups of specially identified students to help peers in difficult situations to make more positive decisions about their lives. Natural Helpers are nominated by students and staff at each school as a person that they would most likely to turn to with a problem. These selected teens receive training, building upon the skills they already have to be natural helpers. In Nevada, the program is implemented in middle and/or high school.

- ✓ ***Counseling Programs***—Nevada public schools offer a variety of counseling activities that directly support substance abuse and violence prevention. Many of these activities are supported with funds from Safe and Drug-Free School and Communities Act. Some of the activities include individual counseling, group counseling on topics selected by students, and class presentations on substance abuse and violence prevention topics. Counseling Programs can also be a part of a Student Assistance Program. In Nevada, the Counseling Programs that are linked to substance abuse and drug prevention/intervention are typically offered to students in a specific school-level, such as middle school.

- ✓ ***Student Assistance Programs (SAP)***—A SAP is a comprehensive, multilevel systems approach to improving the health and academic success of students. Students are identified as exhibiting one or more behaviors that are potential indicators of a health or school performance problem. Students are then referred to a multidisciplinary team that gathers additional data about students' behaviors and makes recommendations regarding interventions. SAP programs come in many types and forms. Frequently used components of a SAP program are student support groups, individual counseling, referrals to community-based groups. In Nevada, SAP's are typically implemented in grades K to 12.

In addition to the five programs, the evaluation identified ten other programs implemented by at least four Nevada school districts. Table 6 lists these ten other frequently used programs.

Table 6

Other Frequently used Substance Abuse and Violence Prevention Programs in Nevada, n=13

Prevention Program	Number of School Districts	Grade Levels
McGruff	6	K-3
Positive Alternative Activities	5	K-8
Quest	5	K-6
Baby Think It Over	5	9-12
Peer Mentoring Programs	5	1-12
Know Your Body	4	K-6
Project ALERT	4	6-8
G.R.E.A.T.	4	7-8
Conflict Management	4	K-8
Summer Programs	4	6-12

Six of the ten programs are commercial programs and are considered universal programs. The other four programs are general model programs: one is considered a selective program (Peer Mentoring Programs) and three (Positive Alternative Activities, Conflict Management, and Summer Programs) can be either a selective or indicated program depending on how the school district implemented it.

The fifteen programs include 11 substance abuse programs, three violence prevention programs, and one program that focuses on human sexuality. An analysis of the 11 substance abuse programs would provide a fairly complete picture of the potential effectiveness of substance abuse prevention efforts in Nevada.

Analysis of Substance Abuse Prevention Curricula and Programs

This section of the report presents the analysis of 11 substance abuse prevention programs implemented in Nevada. It is important to emphasize that this report can not truly identify the effectiveness of substance abuse prevention programs implemented in Nevada public schools. The effectiveness of these programs is best answered with an experimental research design that would allow us to link program implementation with student outcomes. At best, this study can only identify whether Nevada public schools have implemented programs and practices that are considered effective or promising.

> ✓ ***Finding***
>
> *The five primary substance abuse prevention programs in Nevada include an effective program, two promising practices, a program that is not as effective, and a program that has not been researched.*

The section is divided into three parts. First, the section presents the findings of research conducted on the ***five primary programs***. It is followed by an analysis of the ***six other frequently used substance programs***. The third section presents the districts' ***self-ratings of their substance abuse prevention programs*** on the 16 "best practices."

Five Primary Programs

The research literature was investigated to determine whether the five primary substance abuse and violence prevention programs in Nevada had been systematically evaluated and what were the results of the research. Table 7 summarizes the information collected about the five programs. Each program is discussed briefly following the table.

Table 7
Research Information Collected on
Five Primary Prevention Programs in Nevada

Substance Abuse Prevention Programs	Question	
	Has the program been systematically evaluated?	What were the overall results of the research?
D.A.R.E.	Yes	Not effective or promising
Natural Helpers	No	No data
Here's Looking At You 2000	Yes	Effective program
Student Assistance Programs	No	Promising practice
Counseling Programs	No	Promising practice

D.A.R.E.

D.A.R.E. is probably one of the more extensively researched substance abuse and violence prevention programs. Skagar (1997) conducted a meta-analysis of 18 evaluation studies conducted on D.A.R.E. The results were only marginally positive: He found that—

- ✓ DARE had no effect on overall drug use (average for alcohol, tobacco, and drugs).
- ✓ When uses of alcohol, marijuana, and tobacco were tested for separately, DARE students showed less use in the case of tobacco only.
- ✓ DARE registered significant effects for drug knowledge and social skills but only marginal effects on attitudes towards police, attitudes about drug use, and self-esteem.
- ✓ When compared to 25 earlier evaluations of other substance abuse prevention programs, in general, DARE effects were smaller for all measures of drug use.

D.A.R.E. did not make any of the three lists of effective programs reviewed for this evaluation report, including the list of effective programs that are consistent with USDE *Principles of Effectiveness*.

Natural Helpers

The Natural Helpers programs has not been studied systematically in the research literature. We found only one study that investigated program effects. The research community must conduct more research on this program to determine its effectiveness. As a general program model, however, peer-mentoring programs have been studied and these results are reported in the next section.

Here's Looking At You 2000

Several studies have been conducted on Here's Looking at You 2000. Overall, these studies have consistently found that certain aspects of the program have been found to produce desired changes in knowledge, attitudes and practices, and skills. In a review of the research on Here's Looking at You 2000, Swisher, Doebler, Babbitt, & Walton (1991) found several studies to support the following outcomes—

- Improvement in knowledge about risks associated with alcohol and other drug use,
- Improved self esteem and decision making, and
- Reduced use of chewing tobacco and wine coolers.

In addition, one study found reduced use of alcohol, marijuana, inhalants, cocaine, and nicotine in results adjusted for national trends but without an immediate comparison group. Based on overall research results, Here's Looking at You was identified as an effective program in *Applying Effective Strategies*, meeting the USDE *Principles of Effectiveness*.

Counseling Programs

Most Counseling Programs include a wide variety of services, often with no specific curriculum and no specific materials. In addition, some activities within a program are universal, other activities are selective, and still other activities are indicated. Most of the Counseling Programs can be considered early intervention programs, similar to the Student Assistance Programs reported below. In fact, many SAP programs include counseling as one of the services they provide students and their families. Perhaps because of the wide range of activities and outcomes, little is known about the effectiveness of Counseling Programs as a general program model, much like Student Assistance Programs. Nevertheless, many activities within Counseling Programs (e.g., peer mediation, conflict resolution) have been evaluated and have been found to be effective or promising. The extent to which Counseling Programs include these effective activities may be an indication of their effectiveness.

At this time, general Counseling Programs are not on any list of effective substance abuse and violence prevention programs. Nevertheless, early intervention programs (which include Counseling Programs) are considered a promising practice in *Getting Results: California Action Guide to Creating Safe and Drug-Free Schools and Communities* (1998). As a promising practice, the Guide suggests that these programs can be included in a comprehensive, integrated approach to substance abuse and violence prevention. In addition, Support Services (such as Counseling Programs) is one of the 16 best practices listed in this report. For the purpose of this study, a counseling program is considered a promising practice.

Student Assistance Programs

Few early intervention programs, including Student Assistance Programs, have been adequately evaluated, and little is know about their effectiveness. Research on these types of programs is missing, in part, because the programs are complex with different outcomes for different students. Student Assistance Programs are also relatively new. Researchers must conduct additional evaluations before any statements can be made about the effectiveness of this general program model. At this time, Student Assistance Programs are not on any list of effective programs. Nevertheless, Student Assistance Programs (as an early intervention program) are considered a promising practice in *Getting Results: California Action Guide to Creating Safe and Drug-Free Schools and Communities* (1998). As a promising practice, the Guide suggests that these programs can be included in a comprehensive, integrated approach to substance abuse and violence prevention. In addition, Support Services (such as Student Assistance Programs) is one of the 16 best practices listed in this report. For the purpose of this study, a Student Assistance Program is considered a promising practice.

Six Other Frequently used Programs

The research literature was investigated to determine whether the six other frequently used substance abuse prevention programs and practices in Nevada had been systematically evaluated and what were the results of the research. Table 8 summarizes the information collected about the six programs. Overall, three of the other frequently used substance abuse prevention programs are effective or promising; however, the other three programs have not been adequately researched to determine their effectiveness.

> ✓ ***Finding***
>
> *Three of the other the frequently used prevention programs in Nevada are effective or promising. the other three programs have not been adequately researched to determine their effectiveness*

Table 8
Research Information Collected on
Six Other Frequently Used Prevention Programs in Nevada

Substance Abuse Prevention Programs	**Question**	
	Has the program been systematically evaluated?	What were the overall results of the research?
Positive Alternative Activities	Some	Promising practice
Quest	No	Needs to be researched
Peer Mentoring	No	Needs to be researched
Know Your Body	Yes	Effective program
Project ALERT	Yes	Effective program
Summer Programs	No	Needs to be researched

The discussion of the six programs is presented individually below. It is followed by an analysis of the three commercial programs according to the 12 best curriculum and instruction practices of substance abuse programs.

Positive alternative programs are alcohol-, tobacco-, and drug-free safe activities. In Nevada, they include a wide range of activities including after-school activities, academic tutoring, community centers, athletics and other recreational activities, and creative and artistic activities. *Positive alternative activities* have not been researched sufficiently to determine their effectiveness or to guide programs in implementing the most effective activities (Carmona and Steward, 1996). However, single, one –time events that are not part of a comprehensive, integrated program are ineffective. Although *positive alternative activities* did not make any list as an effective program, they are considered a promising practice in *Getting Results:*

California Action Guide to Creating Safe and Drug-Free Schools and Communities (1998). As a promising practice, the Guide suggests that these activities can be included in a comprehensive, integrated approach to substance abuse and violence prevention.

Quest: Skills for Growing is a commercial program and is one of three *Quest* programs on substance abuse prevention. *Skills for Growing* focuses on elementary school students, and the other two *Quest* programs focus on either middle school or high school students. Nevada school districts implement *Skills for Growing*. *Skills for Growing* contains material on alcohol, tobacco, and other drugs and places a strong emphasis on cooperative learning. It includes a strong community service component and offers practice in goal setting and decision-making. This program has not been adequately researched to determine the program's effectiveness in changing students' knowledge, attitude, or behavior about substance use.

Peer-mentoring programs is a general program model that uses peers to provide guidance to other students to avoid substance use. Peer mentoring programs, like many other general program models, have not been studied extensively. These programs lack sufficient research for several reasons: the programs are complex, fairly new, and the outcomes are many and difficult to measure in a cost-effective manner. Several adult/child mentoring programs, such as Big Brothers, Big Sisters have shown positive results if they include reinforcement of positive behavior. Perhaps when sufficient research on peer mentoring is conducted, the studies will identify similar parameters to guide implementation.

Know Your Body is a commercial, multi-component comprehensive school health promotion program for students in grades K through 6 with the goal of empowering students with the skills they need to make their own positive health choices. The program was originally identified as an effective program through the National Diffusion Network (NDN) which required a comprehensive evaluation of the program. The results of several longitudinal evaluations have demonstrated that the program has a significant positive effect on students' health-related knowledge, behavior, and biomedical risk factors such as serum cholesterol levels, blood pressure, cardiovascular endurance, smoking, and diet.

Project ALERT is a commercial, video-based curriculum that uses the social resistance approach to drug use prevention. The curriculum specifically targets cigarettes, alcohol, and marijuana. The research literature reports that the program reduced the initiation of marijuana and tobacco use by 30 percent, and reduced heavy smoking among experimenters by 50-60 percent. In addition, the program was found to be effective for both high- and low-risk students, including minorities, and performed equally well in a variety of socio-economic settings. Based on this research, *Project ALERT* is considered an effective program *in Applying Effective Strategies*, and is consistent with USDE Principles of Effectiveness.

Summer School Programs is a general program model that can include a variety of different types of activities such as academic assistance, recreation, and specific substance prevention activities. Summer school programs, like many other general program models, have not been

studied extensively perhaps because they include a variety of program activities that are developed to address local program goals. This general program model must be researched to determine the model's effectiveness in changing students' knowledge, attitude, or behavior regarding substance use.

Curriculum and Instruction Best Practices

The evaluation examined the potential effectiveness of the three frequently used commercial substance abuse prevention programs by comparing their curriculum against the 12 best curriculum and instruction practices described earlier.[19] For the purpose of comparison, we included two of the three commercial programs (D.A.R.E. and Here's Looking at You 2000)[20] from the five primary substance abuse prevention programs in the analysis.

Information on the five commercial programs was already available in *Making the Grade: A Guide to Drug Prevention Programs* (1996) which rated the programs on our list on four (social resistance skills, normative education, life skills, and developmentally appropriate curriculum) of the 12 best practices. In addition, the guide provided descriptions of the program that allowed us to determine whether the program addressed the remaining best practices. Table 9 identifies with a "✓" whether the six commonly used commercial substance abuse programs in Nevada address the 12 best practices. For those best practices that were rated in *Making the Grade*, the "✓" indicates the program received at least a satisfactory rating. For all other practices, the "✓" indicates that the program was assigned a rating of "3" on the best practice rating scale (in Appendix B) based on a review of program materials.

Overall, the results show that the five commercial programs address most of the best practices of substance abuse programs. The two most frequently used programs in Nevada, i.e., D.A.R.E. and Here's Looking at You 2000, address 12 and 11 of the best practices, respectively. The other four programs address 8 to 10 of the best practices.

> ***✓ Finding***
>
> *The frequently used commercial substance abuse programs in Nevada include most of the best practices in substance abuse prevention.*

It is important to emphasize that a program may not be effective even it includes all 12 practices. For example, the research did not find D.A.R.E. as an effective program even though the program addresses all 12 practices. Here's Looking at You 2000, on the other hand, includes 11 of the best practices and is considered an effective program. In other words, the extent to which a program addresses the best practices can only suggest the potential for effectiveness, but does not guarantee it.

---

[19] The three general program models that are frequently used in Nevada can not be analyzed according to the 12 best practices since they do not include a program curriculum.

[20] The other commercial program, Natural Helpers, was also not included in the analysis because it does not have program curricula, pre se.

Table 9

An Analysis of Five Other Frequently Used Prevention Programs with Best Practices

Best Practice	D.A.R.E.	Here's Looking at You 2000	Know Your Body	Project Alert	Quest
Grade Levels	5-8	K-12	K-6	6,7 or 7,8	K-5
Social Resistance Skills	✓	✓	✓	✓	✓
Normative Education	✓	✓	✓	✓	
Life Skills	✓	✓	✓		✓
Developmentally Appropriate Curriculum	✓	✓	✓	✓	✓
Duration and Intensity of Program		✓	✓		✓
Cultural Relevance	✓	✓	✓	✓	✓
Parent and Community Involvement	✓	✓	✓		✓
Appropriateness for Target Population	✓	✓	✓	✓	
Curriculum Infusion		✓	✓		✓
Instructional Strategies	✓	✓	✓	✓	✓
Staff Training	✓	✓	✓	✓	✓
Comprehensive Materials	✓	✓	✓	✓	✓

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School District Substance Abuse Prevention Efforts Rated on Best Practices

School districts were asked to evaluate the perceived effectiveness of their substance abuse prevention efforts within their district. As part of the survey completed for this evaluation, each school district[21] was requested to rate the degree to which their substance abuse prevention program contained each of the 16 "best practices" identified earlier in this report. For the purpose of the survey, three practices were divided into two components each in order to collect information about each component of the best practice. That is, the survey requested information on both parent involvement and community involvement separately for the best practice—parent and community involvement. It also requested information on needs assessment and program selection for the best practice—planning and implementation. Finally, the survey requested information on both teacher materials and student materials for the best practice—comprehensive materials.

The survey did not request school districts to rate themselves on one best practice, evaluation. Instead, the survey asked districts to identify the type of evaluation that they conducted, if any, with their substance abuse prevention programs. These results are reported separately at the end of this section. In all, school districts rated their substance abuse prevention programs on 18 components of the best practices.

Table 10 presents the self-ratings[22] of the 13 school districts on the 18 practices[23]. The results show that school district representatives identified relative areas of strength and areas for improvement from the list of 18 best practices. Specifically, they reported that their substance abuse prevention programs had four strengths:

- ✓ developmentally appropriate curriculum (4.7),
- ✓ interactive of instructional strategies (4.5),
- ✓ comprehensive student materials (4.5), and
- ✓ implementation of the core components of the adopted programs (4.4).

> ✓ ***Finding***
>
> *Nevada school districts report they have implemented a developmentally appropriate prevention curriculum that actively engages students in prevention issues.*

[21] The Title IV Coordinator was the representative who rated the school district's program in the school districts that receive Title IV funds.

[22] A limitation of any self-rating is that respondents tend to rate themselves higher than an impartial observer. As a result, the relative ratings of the different questions tend to provide more meaningful data than the level of the ratings.

[23] The rating scale ranged from "1" which represented a low rating, to "5" which represented a high rating on that best practice.

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In addition, the school district representatives identified several areas for improvement:

- ✓ parent and community involvement (3.2 each),
- ✓ staff training (3.3),
- ✓ curriculum infusion (3.4), and
- ✓ teacher materials (3.5).

✓ *Finding*

Nevada schools districts report they can improve their prevention efforts by more actively involving parents and the community, and by providing additional staff training, especially in helping teachers integrate prevention instruction into other subject areas.

Table 10
School District Ratings on Best Practices
Of Substance Abuse Programs

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Carson City	5	5	5	5	5	3	3	3	5	3	5	1	5	5	3	5	5	3
Churchill	3	4	4	5	3	3	3	4	3	3	3	3	3	3	4	4	4	3
Clark	3	2	3	5	3	4	4	3	3	4	5	4	4	4	4	5	4	3
Douglas	4	5	4	5	4	4	3	5	4	3	5	3	4	4	4	3	4	3
Elko	5	5	5	5	5	4	3	4	4	4	5	5	5	5	4	5	4	4
Eureka	4	4	4	5	5	5	4	4	4	5	5	2	5	4	5	4	3	3
Humboldt	5	4	5	5	5	3	3	4	5	4	5	4	5	5	4	5	3	4
Lander	4	4	4	5	5	4	5	4	4	3	3	3	5	5	4	5	2	5
Lincoln	4	5	5	4	5	3	4	3	5	3	5	3	3	4	2	5	3	4
Lyon	4	4	4	5	5	3	4	3	3	3	5	4	5	5	4	5	4	NA
Mineral	4	3	4	3	3	4	2	1	3	3	4	4	4	4	4	3	3	2
Storey	3	2	2	5	2	5	1	1	1	3	4	3	5	5	3	4	4	5
Washoe	4	4	4	4	5	3	3	3	4	3	4	4	5	5	5	NA	5	5
Average	4	3.9	4.1	4.7	4.2	3.7	3.2	3.2	3.7	3.4	4.5	3.3	3.5	4.5	3.8	4.4	3.7	3.7

1	Social Resistance Skills	6	Cultural Relevance	11	Instructional Strategies	16	Core Components
2	Normative Education	7	Parent Involvement	12	Staff Training	17	Needs Assessment
3	Life Skills Training	8	Community Involvement	13	Teacher Materials	18	Program Selection
4	Developmentally Appropriate	9	Target Population	14	Student Materials		
5	Length of Intervention	10	Curriculum Infusion	15	Support Services		

Local Evaluations

The evaluation also collected information on the evaluations that school districts conducted on their substance abuse prevention programs since 1993-94. The survey asked school districts to indicate whether the district had conducted process evaluations (program implementation or quality or program implementation) and outcome evaluations[24] (longitudinal, cross sectional, pre/post tests, and national and state comparisons, and experimental design). In addition, districts were asked to submit any written evaluation reports on substance abuse programs to NDE: none were submitted. When interviewed about possible program evaluations, district coordinators reported that they did not formally evaluate their substance abuse prevention programs. In fact, most districts did not collect data to measure progress toward meeting the program goals outlined in their SDFSCA applications.

> ✓ ***Finding***
>
> *Most districts did not conduct systematic evaluations of their substance abuse and violence prevention programs nor measure progress toward meeting program goals.*

Table 11 shows the number of districts (from the 13 school districts, which completed the survey) that conducted process and outcome evaluations on their substance abuse programs at the district level in the last five years. The results show that every school district, except one, collected data on program implementation such as documenting program activities, recording the number of staff trained or numbers of students served. However, most districts reported that the evaluations of program implementation were not done consistently across all programs in the district. Instead, they were done for specific programs or for specific activities within programs.

The results also show that eight of the 13 districts reported collecting data on program quality, such as the impressions of students or staff regarding the quality of the

Table 11.
The Number of Districts that Conducted Process and Outcome Evaluations

Evaluation Method	Number of Districts	
	Yes	No
Process Evaluation		
✓ Program Implementation	12	1
✓ Implementation Quality	8	5
Outcome Evaluation		
✓ Longitudinal	1	12
✓ Cross Sectional	9	4
✓ Pre/Post Tests	7	6
✓ National/State Comparisons	10	3
✓ Experimental Design	1	12

[24] Process evaluations examine the implementation of program activities and outcome evaluations measure the impact of the program on participant knowledge, attitudes, or behavior.

program or services provided. The districts again, however, reported that this type of data collection was conducted for specific programs or activities within the district's overall substance abuse prevention effort. In addition, the information rarely went beyond program staff as part of a systematic evaluation of substance abuse prevention.

Overall, school districts conducted few outcome evaluations that measured the impact of program services on program participants. In addition, most of the outcome evaluation activities served the purpose of the annual needs assessment required of the Title IV Safe and Drug-Free Schools and Communities Act--rather than as part of a systematic evaluation of program activities. For example, the nine school districts that reported they had conducted cross sectional evaluations and the 10 school districts that reported comparing local school district data with state and national data referred to the implementation of the statewide SDFSCA Student Survey and YRBS Survey. In both cases, the school districts used the data as part of the needs assessment for their Title IV application. Most school district supplemented the local data from the statewide surveys with other local data from the school district (suspensions, referrals, expulsions) and youth agencies (Juvenile Probation).

> ✓ ***Finding***
>
> *Most school districts conducted fairly comprehensive needs assessments that included results from statewide surveys and other local data.*

A little over half of the school districts (7 of 13 school districts, 54%) reported using pre and posttests to measure student changes in knowledge and attitudes about substance abuse and violence prevention. Primarily, these school districts administered the pre and posttest surveys that accompanied the Here's Looking at You 2000 program to measure student knowledge and attitude changes about drug use. Several other school districts reported that individual schools collected pre and posttest data on other programs such as Know Your Body, D.A.R.E., and counseling groups. Most school districts, however, did not aggregate student responses on the surveys or other data across schools as part of a district evaluation. Two exceptions included Washoe County which collected pre and posttest data on their Student Assistance Programs across the school district, and Elko County (assisted by the UNR Extension Service) which conducted an experimental study using pre and posttests to measure the effect of the Making up Your Mind About Alcohol program.

Only one school district reported the collection of longitudinal data: Elko County School District began tracking a cohort of 8th graders using a survey developed by the UNR Extension Services. The survey will track the incidence of self-reported, substance abuse and violence statistics every two years.

Findings

The evaluation of substance abuse prevention programs used in Nevada public schools identified several important findings that the Nevada Department of Education and local school districts can use to improve substance abuse prevention efforts. The findings are:

- Current trends in substance abuse and prevention behaviors show that—
  - ✓ Alcohol continues to be the drug of choice among Nevada students; however, some progress has been made. That is, the percentage of students who had a drink before the age of 13 decreased and the percentage of students who had at least one drink decreased. "Binge drinking" seems to be decreasing, but Nevada students are still above the national average for binge drinking.
  - ✓ Tobacco use is declining in most areas: the percentage of students who smoked tobacco before the age of 13 decreased and daily smoking seems to have decreased. Only the lifetime use of smoking tobacco remained stable. The lifetime and frequent use of chewing tobacco is declining. The lifetime and frequent use of smoking and chewing tobacco is below the national average.
  - ✓ The use of marijuana seems to be increasing and Nevada students are above the national average. Although the percentage of students who used marijuana before the age of 13 decreased, its frequent use has increased, and lifetime use of marijuana has leveled off. Nevada students exceed the national levels for both lifetime and frequent use.
  - ✓ The use of other drugs by Nevada students remains relatively low. The use of these drugs, other than cocaine, seems to have peaked and is now declining. Lifetime use of cocaine, however, has increased substantially and has surpasses national rates. Frequent use of cocaine seems to have peaked and appears to be declining.
  - ✓ The percentage of students who reported fighting on school property or bringing a weapon to school has declined. The percentage of students who fight frequently or bring weapons to school frequently, however, has remained stable.
  - ✓ The prevalence rate of students who rode in a vehicle with someone under the influence decreased and the percentage of students who reported doing this behavior frequently remained stable. The percentage of students driving under the influence (both prevalence and frequent rates) increased slightly over previous years.
  - ✓ Use of alcohol and marijuana on school property has increased.

- Nevada schools use a wide variety of commercial, locally developed, and general program models in substance abuse and violence prevention programs.
- Most substance abuse and violence prevention programs in Nevada are universal programs rather than selective and indicated programs.
- Most schools districts implemented prevention efforts that included multiple components.
- Nevada public Schools use five primary substance abuse prevention programs: D.A.R.E., Here's Looking at You 2000. Natural Helpers, Student Assistance Programs (SAP), and Counselor Programs.
- The five primary substance abuse prevention programs in Nevada include an effective program, two promising practices, a programs that is not as effective, and a program that has not been researched.
- Nevada school districts implement six other frequently used substance abuse prevention programs and practices: Positive Alternative Activities, Quest, Know Your Body, Project ALERT, Peer Mentoring Programs, and Summer School Programs.
- Three of the other frequently used substance abuse prevention programs in Nevada are effective or promising; however, the other three programs have not been adequately researched to determine their effectiveness.
- The frequently used commercial substance abuse programs in Nevada include most of the best practices in substance abuse prevention.
- Nevada school districts report they have implemented a developmentally appropriate prevention curriculum that actively engages students in prevention issues.
- Nevada schools districts report they can improve their prevention efforts by more actively involving parents and the community, and by providing additional staff training especially in helping teachers integrate prevention instruction into other subject areas.
- Most school districts conducted fairly comprehensive needs assessments that included results from statewide surveys and other local data.
- Most districts did not conduct systematic evaluations of their substance abuse and violence prevention programs nor measure progress toward meeting program goals.

The overall conclusion of the study is that Nevada school districts are similar to other school districts across the nation. While Nevada school districts implement some effective research-based programs and practices, most programs currently in place have not been evaluated properly.

The evaluation was unable to answer three important questions given the scope and short timeframe for the study. The evaluation was unable to link programs with outcomes, to determine whether programs are implemented consistently across schools and classrooms within each district, and whether each student receives an integrated, comprehensive substance abuse program from the various practices and programs that districts implement. Nevada and individual school districts must conduct a more comprehensive study to answer these three important questions.

Recommendations

The evaluation of substance abuse programs in Nevada should be interpreted within the context that the identification of effective practices and programs in substance abuse prevention is relatively recent. When Nevada school districts, as well as any other school district across the nation, selected the substance abuse programs that they currently implement, little guidance existed. Recent research in substance prevention, however, has now begun to identify effective practices and programs that offers school districts across the nation an opportunity to reexamine their substance abuse prevention programs for effectiveness.

The findings from this evaluation are consistent with this context and suggest several procedures to improve the substance abuse prevention programs offered to Nevada students so that Nevada achieves safe and drug free schools for the state's children.

1. School districts should review all substance abuse prevention programs implemented in the school district based on the 16 "best practices" and the USDE Principles of Effectiveness.

2. The Nevada Department of Education (NDE) should provide technical assistance to help school districts—

   - ✓ Develop a comprehensive, integrated approach to substance abuse prevention that impacts all students during their school careers,
   - ✓ set measurable program goals,
   - ✓ select and implement effective, research-based substance abuse prevention programs, and
   - ✓ develop and conduct procedures to measure the effectiveness of programs and measure progress toward achieving program goals.

3. Schools districts should develop plans to align their substance abuse prevention efforts with their review of the programs and with the technical assistance provided by NDE about effective programs and practices.

4. The Nevada Department of Education, in conjunction with the committee established under Assembly Bill 376, develop plans to implement the recommendations listed above.

Appendix A

Effective Programs in Substance Abuse Prevention

Appendix B

Substance Abuse and Violence

Prevention Survey Instrument

Nevada Department of Education
Safe and Drug-Free Schools and Communities Act

Progress Report
1997-98

Local District Survey
Part 2: School Drug Prevention Programs

Please complete and return Part 1—Background Information and Part 2—School Drug Prevention Program surveys and mail (with attachments) in one package ***no later than April 24, 1998*** to:

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Nevada Department of Education
Health and Safety Team
700 E. 5th Street
Carson City, Nevada 89701-9050

General Directions for Completing Survey

Part 2 of the SDFSCA Survey is concerned with program design and the instructional and planning components of your district's drug prevention program. Please complete this survey for your entire ***district drug prevention program*** for the 1997-98 school year.

Program Design

1. Which of the following comprehensive health and drug prevention programs does the district use? *(Identify the **No. of Schools**, etc., for each of the programs used in the district).*

Comprehensive Health and Drug Prevention Programs	**No. of Schools**	**Grade Levels**	**No. of Students**
a) D.A.R.E. (Drug Abuse Resistance Education)			
b) Here's Looking at You 2000			
c) Know Your Body			
d) Project Alert			
e) Quest: Skills for Growing, Adolescence, or Action			
f) Positive Action			
g) Natural Helpers			
h) Nevada Health Course of Study			
i) Other (Specify) _____			
j) Other (Specify) _____			
k) Other (Specify) _____			
l) Locally developed program (Specify) _____			
m) Locally developed program (Specify) _____			

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Program Implementation

Directions—Rate the degree to which the entire ***district drug prevention program*** contains each of the program components by circling the choices in the rating scale from 1 to 5. Refer to the descriptors when rating the program. An important part of the rating scale is the likelihood that every student in the district would be exposed to the program component (at the rating given). This is based on the assumption that schools offer different drug prevention curricula and that different curricula may emphasize different program components. Under each rating scale, then, please ***estimate*** the percentage of students (or schools) that receive (or cover) the program component at the rating given. For example, if five of the ten elementary schools in the district offer a drug prevention curricula that rates a "5" on Social Resistance Skills, then 50% of the student population would be exposed to the program component (at the rating given, i.e., "5"). *(Below the choice boxes, please provide a short summary of evidence supporting your choice.)*

2. **Social Resistance Skills:** The program teaches students the skills to resist drugs. These skills include social competencies, communication, peer relationships, assertiveness, and understanding media influences.

1	2	3	4	5
These skills get little or no coverage in the program.		These skills receive a moderate amount of coverage in the program. Teachers attempt to teach some of the skills to students.		These skills receive major coverage in the program. Teachers emphasize these skills in drug prevention lessons.

Percent of students/schools: _____

Evidence:

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3. **Normative Education:** The program teaches students that most people do not, in fact, use drugs.

1	2	3	4	5
This concept gets little or no coverage in the program.		This concept receives a moderate amount of coverage in the program. Teachers attempt to teach some of this concept to students.		This concept receives major coverage in the program. Teachers emphasize this concept in lessons.

Percent of students/schools: _____

Evidence:

4. **Life Skills**: The program teaches a broad range of self-management skills including self-esteem, decision making, problem solving, communication skills, and resilience.

1	2	3	4	5
These skills get little or no coverage in the program. Teachers provide little coverage of these skills.		These skills receive a moderate amount of coverage in the program. Teachers attempt to teach some of the skills to students.		These skills receive major coverage in the program. Teachers emphasize these skills in drug prevention lessons.

Percent of students/schools: _____

Evidence:

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5. **Developmentally Appropriate Curriculum:** The program contents and activities are appropriate to the age level of the students served.

1	2	3	4	5
The materials are not appropriate to the interests and ability levels of students. Materials are either too advanced or too juvenile for older students.		Some of the materials are appropriate to the interests and ability levels of students. Other materials are not geared to the appropriate age level.		The materials are entirely appropriate for the age group with whom they are being used.

Percent of students/schools: _____

Evidence:

6. **Length of Intervention:** The program is of sufficient duration and has an adequate number of lessons.

1	2	3	4	5
The program is of short duration (one year or less) and contains fewer than ten lessons.		The program spans at least two years with at least 10-15 lessons per year.		The program spans three years or more and contains at least 10-15 lessons per year.

Percent of students/schools: _____

Evidence: (Please indicate the number of years and lessons per year covered by the program).

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7. **Cultural Relevance:** The program is relevant to the cultural groups represented in the school.

1	2	3	4	5
The program does not match the cultural needs of students in the school. Cultural groups do not identify with the information in the program.		The program addresses the cultural needs of some students at the schools, but additional materials are needed to address other populations.		The program was designed to match the cultural needs of students. Materials show an understanding of the culture of the students.

Percent of students/schools: _____

Evidence:

8. **Parent Involvement:** The program has information and activities to involve parents in the drug prevention program.

1	2	3	4	5
The program has little or no parent activities or information.		The program has some parent activities and information, but more or better quality information is needed.		The program has excellent materials and resources for parent involvement and activities.

Percent of students/schools: _____

Evidence:

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9. **Community Involvement:** The program has a community involvement component that helps tie activities in school with drug prevention activities in the community.

1	2	3	4	5
The program provides little or no information about how to tie school activities to the community.		The program has some information and activities about involving the community, but more information is needed.		The program has a number of excellent resources for involving the community in the school prevention program.

Percent of students/schools: _____

Evidence:

10. **Target Population:** The program is geared to the identified needs of students. For example, programs for at risk students are more intensive, or those for pregnant teens or student athletes are geared more to their specific needs and concerns.

1	2	3	4	5
The program has little or no relevance to the students for whom it is being provided. Materials do not address their needs		The program has some relevance to the target group, but could have more specific information related to their needs.		The program is completely appropriate to the target audience. Most or all materials are relevant to their needs.

Percent of students/schools: _____

Evidence: (Please identify specific target groups (special populations) and the degree of relevance of the program for their needs).

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11. **Curriculum Infusion:** To the extent possible, the prevention program has been integrated with other subject areas in the school. For instance, problem solving and decision making are taught through social studies or language arts.

1	2	3	4	5
The program is taught in isolation from other subject areas and has little connection with other disciplines.		The drug program is integrated with other subject areas to some extent in some classrooms, but more integration is needed		Most drug prevention activities are fully integrated with other subject areas in almost all classrooms

Percent of students/schools: _____

Evidence:

12. **Instructional Strategies:** Teaching strategies are consistent with program goals and outcomes. For instance, teachers use role playing, small group discussion and peer-led activities when appropriate.

1	2	3	4	5
Most teaching involves didactic teaching with information being given to students. Very little discussion or class activities occur.		The teacher provides information/lectures students about half the time, and there are some instances of class discussion, role-playing and peer-led activities.		The instructional strategies are varied and rich and are appropriate to the information or concepts being presented. Students have ample opportunities for discussion and active involvement.

Percent of students/schools: _____

Evidence:

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13. **Staff Training:** Sufficient staff training has been provided to teachers. This training has equipped them with a wide variety of instructional skills and information about drug prevention.

1	2	3	4	5
Staff training has been minimal. Very few staff have had two or more in-service days devoted to drug prevention programs. The training has had little or no effect on teaching styles		Most staff have had two or more days of in-service training devoted to drug prevention instruction. This training has had some impact on their ability to deliver quality instruction		Virtually all instructional staff have had several days of training in effective drug prevention. The skills they have learned are evident in the classroom. Building leadership have also received training in drug prevention

Percent of students/schools: _____

Evidence:

14. **Teacher Materials:** Teacher materials are complete, easy to follow, and provide information on purpose of activities, time required, and which lessons are most important when instructional time is limited.

1	2	3	4	5
Teacher materials are not adequate to provide quality instruction. The instructions are not clear and the lessons are sometimes confusing.		The program contains some good materials, but the quality is not consistent throughout the program. Some instructional areas are weak and not fully developed.		The materials and instructions are clear and concise and give excellent advice on how to structure the program. Information materials are relevant, thorough, and accurate.

Percent of students/schools: _____

Evidence:

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15. **Student Materials:** Student materials are comprehensive, factual, interesting, and appropriate to student developmental levels.

1	2	3	4	5
Student materials are poorly developed and do not capture the interest of students. The accuracy of some information is questionable.		Student materials have some good qualities, but there are some shortcomings. Some materials are not interesting to students and may not be completely accurate or up-to-date.		The materials for students are excellent. They capture student interest and are accurate and up-to-date.

Percent of students/schools: _____

Evidence:

16. **Support Services:** The program provides a student assistance program and counseling for students as needed.

1	2	3	4	5
Little or no individual assistance is available beyond the classroom for students. Teachers must provide individual assistance as needed.		Some individual assistance is available for students e.g., Student Assistance Program (SAP), peer helper program, but more is needed. Not all students can get special assistance.		Several outside resources are available for students who need individual assistance. Assistance is timely and thorough.

Percent of students/schools: _____

Evidence:

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17. **Implementation of Core Program Components:** The basic content, structure, and delivery of the program have been implemented as intended by program developers.

1	2	3	4	5
Many features of the program such as materials, number of lessons taught, or professional development were eliminated or reduced when the program was implemented.		Most of the original program features are being implemented but some important elements were eliminated, or not implemented in all classroom/schools.		The program is being implemented virtually in its entirety in all schools and classrooms as it was intended when developed.

Percent of students/schools: _____

Evidence: (Explain which program components have been shortened or eliminated)

18. **Needs Assessment:** District schools have made a systematic effort to identify student needs and set instructional priorities for selection of the prevention program.

1	2	3	4	5
Little student needs assessment information was used to determine the type of program to be selected.		Some student needs assessment information was obtained e.g., student use survey. It was used to set some general parameters for selecting a program.		A comprehensive assessment of student needs was conducted before selecting the program. This information was used to select a program that matched the needs of students.

Percent of students/schools: _____

Evidence:

19. **Program Selection**: District schools have examined the research base on effective practices prior to selecting a new program.

1	2	3	4	5
Little or no research information was consulted prior to program selection. Selection was determined by reading brochures or information about commercial programs.		Some research was conducted prior to selecting a program, but more investigation could have been conducted.		A thorough search of the research literature was conducted prior to selection of the prevention program. It is consistent with the district's long range plan.

Percent of students/schools: _____

Evidence:

20. Several types of evaluation activities can be use to evaluate drug prevention programs. Please indicate (yes or no) which of the following methods have been conducted at the district level since 1993-94. *(Please submit any reports or results of the preceding evaluations you have indicated as having completed).*

EVALUATION METHODS	Yes	No
PROCESS ASSESSMENTS		
Program implementation—documentation of program activities, records of number of staff trained, numbers of individuals served, etc.		
Quality of program implementation—impressions of students or staff regarding the quality of programs or services provided; e.g., evaluation of a training program, questionnaires collected from participants at the close of a special events regarding their reaction to the event.		
OUTCOME OR IMPACT ASSESSMENTS		
Longitudinal—Longitudinal data collection of outcomes measures (includes repeated measures on the same group of students; e.g., administering student use surveys to the same group of students as the progress through various grades).		
Cross Sectional—Cross sectional data collection of outcome measures (includes administration of repeated measures on the same students; e.g., student use surveys administered to 10th graders every year with comparisons made between one year's tenth graders and the next year's tenth graders).		
Pre/Post Tests—Comparison of pre and post assessments on the group receiving services.		
National and State Comparisons—Comparison of outcome measures for district students with national or state averages.		
Experimental Design—Comparison of outcome measures for a treatment group (students receiving the program) and a control group (students who do not receive the program).		

Appendix C

Substance Abuse and Violence

Prevention Programs In Nevada

Table 4a
Commercial Substance Abuse and Violence Prevention Programs In Nevada in Grade Levels

Commercial Programs	School Districts												
	Carson	Churchill	Clark	Douglas	Elko	Eureka	Humboldt	Lander	Lincoln	Lyon	Mineral	Storey	Washoe
BABES (U)		K-3			3								Pre-K
Baby Think It Over (U)		7-12		9			9-12				8		9-12
Big Brothers/Big Sisters (S)						K-12							
D.A.R.E. (U)	5	6, 8*	5,7, 8*	5	5*	5,7* (1-4, 6)	5	5	4-8	5	5	5	6
Defense Now for Schools (U)		2-8											4-6
Discover Skills, For Life Preventing Violence (U)			K-5					K-5*					
Get Real About Aids (U)							5-12						
Get Real About Violence (U)							5-12						4-12
G.R.E.A.T. (U)	4							7		7			7-8
GROARK (U)	3-4												
Here's Looking at You 2000 (U)	K-4, 6-8*		2,4		K-8*		K-12*	K-4*		K-12*		K-12*	K-12
Kelso's Choice (U)	3-4												
Kids on the Block (U)				K-3									
Know Your Body (U)		K-6*					K-6*		K-6	K-4			
McGruff (U)	K-1		K-5				K-4	K-3	K-3				K-3

Examples of Effective Programs

Applying Effective Strategies identified 52 research-based programs described as effective in at least one evaluation of the research on prevention programs. USED and EDC staff reviewed the programs list and concluded, upon further investigation of the literature (i.e., individual program evaluations) that the programs be identified as either "effective" or "promising." It is not a complete list: more programs will be identified in the future.

Effective Programs. The following programs are research-based and have consistently produced results as reported in the literature on substance abuse, violence and disruptive behavior prevention.

- ✓ Across Ages
- ✓ Adolescent Training and Learning
- ✓ Anger Coping Intervention (Lohman)
- ✓ BASIS Big Brothers/Big Sisters of America
- ✓ Bry's Behavioral Monitoring and Reinforcement Program
- ✓ Bullying Prevention Program
- ✓ Child Development Project (CDP)
- ✓ Effective School Project
- ✓ Families and School Together (FAST)
- ✓ Focus on Families
- ✓ Growing Healthy
- ✓ Life Skills Training (LST) Program
- ✓ The Midwestern Prevention Project (MPP)
- ✓ Preparing for the Drug-Free Years
- ✓ Project Northland
- ✓ Project PATHE
- ✓ Promoting Alternative Thinking Strategies
- ✓ Quantum Opportunities
- ✓ Reconnecting Youth (RY)
- ✓ Rotheram's Social Skills Training (RSST)
- ✓ Strengthening Families Program (SFP)
- ✓ Structural Family Therapy (SFT) Program for Hispanic Families
- ✓ Student Training Through Urban Strategies (STATUS)
- ✓ Weissberg's Social Competence Promotion Program (WSCPP)
- ✓ Young Negotiators

The following programs can also be categorized as research-based. However, only certain aspects of the program have been shown to produce desired changes in knowledge, attitudes, practices, and skills.

- ✓ Adolescent Alcohol Prevention Trial (AAPT)
- ✓ Adolescent Transitions Program (ATP)
- ✓ Alcohol Misuse Prevention Program
- ✓ CHOICE Interventions
- ✓ Here's Looking at You, Two and 2000
- ✓ I'm Special
- ✓ Nebraska Network of Drug-Free Youth Program
- ✓ Project ALERT
- ✓ Project CARE
- ✓ Project SMART/SMART Leaders
- ✓ Project Success
- ✓ School Transitional Environment Project (STEP)
- ✓ Seattle Social Development Project
- ✓ Teenage Health Teaching Modules

Promising Programs. The following programs are promising. They have been recognized publicly and have appeared in a professional journal or publication. However, they have not been fully evaluated, and/or evaluation results are pending.

- ✓ Effective Behavior Support (EBS)
- ✓ First Step to Success
- ✓ Lane School Program
- ✓ Multimodel School-Based Prevention Demonstration
- ✓ PeaceBuilders
- ✓ Positive Adolescent Choices Training (PACT)
- ✓ Project ACHIEVE
- ✓ The Resolving Conflict Creatively Program (RCCP)
- ✓ Second Step: A Violence Prevention Curriculum
- ✓ Society-based programs, including: community policing; public service announcements, warning of dangers of drug use and other risk-taking behaviors; drug supply interdiction to increase retail drug (i.e., tobacco) prices; and increased taxes on alcohol and tobacco
- ✓ Westerly Public Schools Program Systemwide Efforts in Westerly, New Jersey

Table 4b
General Models of
Substance Abuse and Violence Prevention Programs

General Program Models	Carson	Churchill	Clark	Douglas	Elko	Eureka	Humboldt	Lander	Lincoln	Lyon	Mineral	Storey	Washoe
Alcoholic's Anonymous (I)													9-12
Conflict Management (U)	K-5		K-12			K-6	K-8						
Counselor Programs (U)	K-5*	9-12	6-8*	K-12*		K-9	K-12					K-5*	K-12
Family Resource Center (U)		K-12											K-12
Just Say No Clubs (U)			K-5										
Peer Mentoring Programs (S)		1-6	6-12	??			6-12						7-12
Positive Alternative Activities (S)	6-8	3-8						K-5	K-6				K-12
S.A.D.D. (U)		9-12			9-12								9-12
Special Events e.g., Drug-Free Grad Night (U)		12	K-12			9-12	7-12	12					K-12
Student Assistance Programs (SAP) (S,I)	6-12	K-12*	K-12*	K-12			K-12*			K-12*			Pre K-12*
Summer Programs (S)		7-12							7-12			K-5	6-12

Table 4a—cont.
Commercial Substance Abuse and Violence Prevention Programs

Commercial Programs	Carson	Churchill	Clark	Douglas	Elko	Eureka	Humboldt	Lander	Lincoln	Lyon	Mineral	Storey	Washoe
Natural Helpers (U)	6-12*	6-12	9-12	6-12*		7-12	9-12	6-8*		5-12*		6-12*	7-12
Peace Patrol (U)			K-5										
Positive Action (U)	3		K-5	K-6*									
Project ALERT (U)	6,7		6,8		7-8*		6-8						
Quest (U)			K-5				5-6		2-6		6		4-6
Sails (U)					9-12								
Second Step (U)					1-8*								
TRIBE (U)				??	K-5		5-6				2-4		

Table 4c
Locally-Developed Substance Abuse and Violence Prevention Programs

Local Programs	Carson	Churchill	Clark	Douglas	Elko	Eureka	Humboldt	Lander	Lincoln	Lyon	Mineral	Storey	Washoe
Academy Anti-Drug Presentation Program (U)			6-12										
Child Abuse Presentations (U)						K-6							
Compilation of Resource Essentials (U)			K-8										
Creating Safe Harbors (U)					9-12								
Elko County Alert (I)					4-12								
Family Life/Sex Education/Aids (U)				5-9, 11*									
Human Growth & Development/Aids (U)							5-12*						
Just Do It (U)					5			4-5					
Latch Key Safety Skills (S)					2								
Leadership Camp (S)			6-12										
Make Up Your Mind About Alcohol (U)					5								
Parent Education Classes (U)		K-12				K-12							
Parent Networks (U)			K-12										
Peer Presentation Program (U)			K-5										
S.H.A.R.E. (U)													
S.M.I.L.E. (U)		9-12											K-12

Table 4c—(cont.)
Locally-Developed Substance Abuse and Violence Prevention Programs

Local Programs	Carson	Churchill	Clark	Douglas	Elko	Eureka	Humboldt	Lander	Lincoln	Lyon	Mineral	Storey	Washoe
Status Leadership Conference/Retreat (S)			6-12										
Staying Alive (S)					4								
Student-Parent Drug Intervention (S)			6-12										
Talk About It (U)													9-12
Washoe County Substance Abuse and Violence intervention (I)													K-12

* Designates one of 3-4 primary substance abuse and violence prevention programs in the district.